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Ontario

ROYAL COMMISSION OF INQUIRY INTO CERTAIN
DEATHS AT THE HOSPITAL FOR SICK CHILDREN AND
RELATED MATTERS.

Hearing held
8th floor
180 Dundas Street West
Toronto, Ontario

The Honourable Mr. Justice S.G.M. Grange

Commissioner

P.S.A. Lamek, Q.C.

Counsel

E.A. Cronk

Associate Counsel

Thomas Millar

Administrator

Transcript of evidence
for

MARCH 8, 1984

VOLUME 117

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ROYAL COMMISSION OF INQUIRY INTO CERTAIN
DEATHS AT THE HOSPITAL FOR SICK CHILDREN
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Hearing held on the 8th Floor,
180 Dundas Street West, Toronto,
Ontario, on Thursday, the 8th
day of March, 1984.

- - - -

THE HONOURABLE MR. JUSTICE S.G.M. GRANGE - Commissioner
THOMAS MILLAR - Administrator
MURRAY R. ELLIOT - Registrar

APPEARANCES:

E. CRONK	Commission Counsel
D. HUNT)	Counsel for the Attorney
L. CECCHETTO)	General and Solicitor General
	of Ontario (Crown Attorneys
	and Coroner's Office)
I.J. ROLAND)	Counsel for The Hospital for
M. THOMSON)	Sick Children
R. BATTY)	
B. PERCIVAL, Q.C.	Counsel for The Metropolitan
	Toronto Police
B. SYMES	Counsel for the Registered
	Nurses' Association of Ontario
	and 35 Registered Nurses at
	The Hospital for Sick Children

(Cont'd) ..



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APPEARANCES (CONTINUED):

D. BROWN	Counsel for Susan Nelles - Nurse
E. FORSTER	Counsel for Phyllis Trayner - Nurse
M. ROSENBERG	Counsel for Sui Scott - Nurse
J.A. OLAH	Counsel for Janet Brownless - R.N.A.
B. KNAZAN	Counsel for Mrs. M. Christie - R.N.A.
S. LABOW	Counsel for Mr. & Mrs. Gosselin, Mr. & Mrs. Gionas, Mr. & Mrs. Inwood, Mr. & Mrs. Turner, Mr. & Mrs. Lutes, and Mr. & Mrs. Murphy (parents of deceased children)
F.J. SHANAHAN	Counsel for Mr. & Mrs. Dominic Lombardo (parents of deceased child Stephanie Lombardo); and Heather Dawson (mother of deceased child Amber Dawson)
W.W. TOBIAS	Counsel for Mr. & Mrs. Hines (parents of deceased child Jordan Hines)
J. SHINEHOFT	Counsel for Lorie Pacsai and Kevin Garnet (parents of deceased child Kevin Pacsai).

VOLUME 117



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BmB.jc
A

1
2 --- Upon commencing at 9:30 a.m.

3 THE COMMISSIONER: We held a voir
4 dire last night with respect to certain evidence,
5 particularly some meetings that were held between
6 this witness and Phyllis Trayner. The evidence is
7 certainly relevant to Phase II but it is also
8 arguably relevant to Phase I as well and all evidence
9 that is or can be relevant to Phase I must be heard
10 in Phase I. Accordingly, I have ruled that it be led.

11 I want to emphasize however that I
12 have not assessed its weight and in the end I may
13 determine that it has no weight at all. I hope that
14 the media will understand and not give the evidence
15 too much promptness. Now, Miss Cronk?

16 MS. CRONK: Thank you, sir.

17 JANET BROWNLESS, Resumed

18 FURTHER DIRECT EXAMINATION BY MS. CRONK:

19 Q Ms. Brownless, in light of what
20 the Commissioner has ruled and just said on this
21 matter, I have a few further questions for you and
22 then we will continue as we were yesterday afternoon.

23 I would like to direct your attention
24 to Wednesday, March 25th, 1981, the day that Susan
25 Nelles was charged with the murder of Justin Cook.

As I understand it, you were
originally scheduled to work long night duty on that
Wednesday night; do I have that correctly?



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A. That's correct.

Q. We have heard however from prior witnesses, and I would ask you simply to confirm if indeed it is correct, that you were notified on the Tuesday, March 24th, not to come in the next day, that is, not to come in on Wednesday night for work, is that correct?

A. I don't recall when I was notified not to come into work that night.

Q. All right. Well, apart from the timing of when you were notified I take it you were notified not to come in that Wednesday night?

A. I think I found out Wednesday not to come in on Wednesday.

Q. All right. And you were not scheduled to work during the day on Wednesday but rather the long nights?

A. That's correct.

Q. And as I understand, you were also interviewed by representatives of the Metropolitan Toronto Police on that Wednesday concerning Justin Cook, is that correct?

A. That's correct.

Q. Do you recall where the interview was held?



A.3

1

2

A. At my house.

3

Q. Do you recall what time the
officers arrived at your house?

4

5

A. Approximately 8, 8:30.

6

Q. In the morning?

7

A. That's correct.

8

Q. And after you discussed Justin
Cook with them that morning, were you then asked
certain questions about Allana Miller?

9

10

A. That's right.

11

Q. The discussion with respect to
Allana Miller as I understand it was not completed
that day, the interview was interrupted?

12

13

A. That's correct.

14

Q. Do you recall what time the
police officers in fact left your house?

15

16

A. Just after lunch.

17

Q. Would that be approximately 12:30?

18

A. Approximately, yes.

19

Q. All right. Did you know by
the time the police officers left your house that
Susan Nelles had been arrested or was going to be
arrested for the murder of Justin Cook?

20

21

22

A. No, I didn't

23

Q. That had not come up during your

24

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A.4

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discussion with them?

A. It didn't come up, no.

Q. Prior to your meeting with the officers on the Wednesday had you been informed by anyone that there was the intention that a charge of murder be laid against anyone at the Hospital?

A. I wasn't informed by anybody.

Q. After the police officers left your house at approximately 12:30, did you have occasion to speak with Phyllis Trayner?

A. Yes, I did.

Q. How did that come about?

A. We were supposed to have lunch, so, I phoned her and she said that the police were still there and she would call me back.

Q. She said the police were where?

A. At her house.

Q. All right. And did she in fact call you back?

A. Yes, she did.

Q. At approximately what time was that?

A. Approximately 3, 3:30.

Q. And what was said during that discussion?



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A. She was crying and she asked me to come over and I asked her what was wrong and she just was crying so I went over there.

Q. Did you tell her that the police had been at your house as well interviewing you?

A. She was aware of that from the earlier conversation.

Q. Is that when you told her?

A. Yes.

Q. And was there any further discussion between you at that time?

A. No, I just went over to her house.

Q. When you arrived at her house what was discussed between you?

A. She said that the police were there until approximately 3, 3:30, I can't recall exactly what time she said, and I said they left my place early and she said to me that they're going to arrest Sue for the murder of Justin Cook and I didn't believe her, I said you must be mistaken. I don't know time frames but then we sat and watched the news and it came on the news and that's when I found out.

Q. All right. And you hadn't



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known prior to Mrs. Trayner telling you that and then watching the news that Susan Nelles was going to be arrested?

A. That's right.

Q. Did Mrs. Trayner say anything else to you while you were at her house that afternoon?

A. I can't remember everything that was said during the afternoon. The only other thing she said to me was while the news was on we were watching TV and I was in a state of shock because I didn't believe what was happening and she said to me or, well, she was looking at the television and I don't know if her husband was there or not at that time, why her, why not me, I was there just as much as she was. I took it as like a mother grieving over her child, I didn't think it unusual at all.

THE COMMISSIONER: I'm sorry, I was there just as much as she was?

THE WITNESS: Yes.

MS. CRONK: Q. Was there anyone else present that afternoon other than Phyllis Trayner and yourself when you went to her house?

A. I can't recall what time her husband came home but no one else was there.

Q. You had gone to her house alone I take it?



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A. Yes.

Q. How long did you stay?

A. I can't recall if I left after
the news or not.

Q. Do you recall anything else
that was discussed that afternoon while you were at
her house?

A. No, I don't.

Q. Did you leave her house alone?

A. I think I did, yes.

Q. She didn't go with you?

A. No.

Q. What significance if any did
you attach to that remark by Mrs. Trayner?

A. Just that it was like a mother
grieving over her child that was dying.

Q. Did you have occasion to see
Mrs. Trayner later that day?

THE COMMISSIONER: I'm sorry, that
answer doesn't mean anything to me at all. Perhaps
it should. What did you mean by that?

THE WITNESS: What answer was that?

THE COMMISSIONER: Well, who was the
child and who was the mother?

THE WITNESS: Well, when a child dies



A.8

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2

at the Hospital a lot of times the mothers say, why
not me, why the child.

3

4

THE COMMISSIONER: Oh, why was she ...
all right.

5

6

MS. CRONK: Now, sir, I am not
sure that I understand when I thought I had the first
time.

7

8

THE COMMISSIONER: All right.

9

10

MS. CRONK: Q. Could you explain for
us if you can further what you meant when you said
you thought it was like a mother expressing grief over
the death of a child?

11

12

13

A. When a child dies a mother says
why couldn't I have died, why the child, that type of
thing, that's what I meant.

14

15

16

Q. Had you observed that by
mothers before when their child had died at the
Hospital?

17

18

A. Yes, I have.

19

20

Q. Did you interpret or react to
Mrs. Trayner's comment in the same way as you had to
mothers who were in that situation when they said
that kind of thing?

21

22

A. That's correct.

23

24

25

Q. Did you attach any other



A.9

significance to it?

A. No, I didn't.

Q. Did you have after you left her house that afternoon occasion to see her again on that Wednesday?

A. I can't recall if I saw her again or not.

Q. Do you recall attending a meeting at the Hospital at approximately 7 o'clock that Wednesday night?

A. It was brought to my attention the other day by reading the document but I didn't recall going.

MS. CRONK: Mr. Registrar, could you show the witness please if you would Exhibit 32A.

Q. I would ask you to turn if you would please to Tab 17.

A. I have that.

Q. Do you have that, all right. This document is handwritten notes prepared by Mrs. Radojewski that has been marked as an exhibit here, Ms. Brownless, and they were also marked as an exhibit at the preliminary hearing. Could you turn to page 10 if you would, please. The pages are numbered in the top right-hand corner.



A.10

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2

THE COMMISSIONER: Page 10?

3

MS. CRONK: Page 10, sir.

4

THE WITNESS: I have it.

5

MS. CRONK: Q. Do you have that?

6

A. Yes.

7

Q. There is mention in Mrs.

8

Radojewski's notes, Ms. Brownless, of a meeting being

9

held at the Hospital at 7 o'clock. There are two

10

Janets recorded as having been present; the first

11

Janet is simply described as Janet without a last

12

name and the second is Janet Bead. Do you recall now

13

whether you did attend a meeting at the Hospital

14

at 7 o'clock that night?

A. Yes, I do.

15

Q. All right. And Mrs. Radojewski

16

has also listed a number of people that according to

17

her recollection at the time she made these notes

18

were in attendance at that meeting. Do you recall

19

now whether or not Phyllis Trayner was at that meeting?

20

A. I can't recall seeing anybody

21

else there, I can't recall the meeting at all.

22

Q. Do you recall what was discussed

23

at the meeting?

A. Not exactly, no.

24

Q. Was there any further discussion

25



A.11

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between yourself and Phyllis Trayner that evening?

3

A. I can't say, I don't remember.

4

5

Q. Do you recall any discussion
with respect to the deaths of any of the children at
the Hospital?

6

A. I can't remember.

7

8

Q. The next day, Thursday, March
26th, did you have occasion to speak to Mrs. Radojewski?

9

A. Yes, I did.

10

Q. How did that come about?

11

A. I decided to go away to my
mother's house up north, so, I phoned her to give her
my phone number where I could be reached if she needed
me.

14

Q. Where does your mother live,
or where did she live then?

15

16

A. They live just north of Parry
Sound in Dunchurch.

17

18

Q. Did you then call Mrs. Radojewski,
I think you said, on Thursday?

19

A. Yes, before I left.

20

Q. And told her you were going away?

21

A. That's right.

22

Q. And gave her your phone number
where you could be reached?

23

24

25



A.12

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A. That's correct.

3

Q. Why did you do that?

4

A. Just in case she needed me for anything or wanted to ask me anything or in case the police wanted to talk to me further they would know where to reach me.

7

Q. When did you return to Toronto?

8

A. The Friday evening.

9

Q. Did you return alone or were you accompanied by anyone?

10

11

A. My mother came back with me.

12

Q. Prior to returning to Toronto on Friday with your mother, had you learned of the three additional charges that had been laid against Susan Nelles?

13

14

15

A. On the way home in the car on the news I learned it.

16

17

Q. Did you have occasion to speak to Mrs. Radojewski again once you arrived back in Toronto that Friday?

18

19

A. Yes, I did.

20

Q. How did that come about?

21

A. When I came back into the city I phoned her to tell her that I was back so she wouldn't be trying to call up there and wouldn't know where I was.

22

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A.13

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Q And by the time you called her,
did you know that those three additional charges had
been laid?

A. Yes, I did.

Q What was discussed between
Mrs. Radojewski and yourself when you spoke to her on
the telephone?

A. I don't recall.



Brownless, dr.ex.
(Cronk)

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DM/ln

Q. Do you recall any mention
being made of Mrs. Trayner during that conversation?

A. Yes, I do.

Q. Can you tell me what what
there was, do you remember that?

A. Liz asked me to call Phyllis
because her husband was away for the weekend.

Q. I'm sorry could you take
this a little more slowly and speak up a bit if
you could Miss Brownless because I have difficulty
hearing ~~you~~

A. I don't think this is working.
Liz asked me to call Phyllis because her husband
was away. So after I talked to Liz I picked up
the phone and called Phyllis and asked her if
she wanted to come over to my house because my
mother was there, and spend the night, and she said
no. I said would you mind if my mother and I come
over to your house to see how you are doing. She
said "all right", so we went over to her house.

Q. Could I ask you to stop
there for a moment.

A. Yes.

Q. Why did you understand Mrs.
Radojewski wanted you to call Mrs. Trayner?



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A. Because her husband was away
for the weekend.

Q. Did you have the impression
that she was concerned about Mrs. Trayner?

A. Just for being alone for the
weekend, yes.

Q. And you did call Mrs. Trayner?

A. Yes, I did.

Q. Was it your suggestion during
that conversation that she come to your home?

A. That's right.

Q. And I take it she declined?

A. That's right.

Q. And then you said you asked
Mrs. Trayner whether or not your mother and
yourself could go to her home?

A. That's right.

Q. And did you do so?

A. Yes, we did.

Q. Why did you want to go to
her home?

A. Just to see if she was okay
maybe I could convince her to come back to my house.

Q. And did your mother and
yourself go to Mrs. Trayner's?



B3

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2

A. Yes, we did.

3

4

Q. Was there anyone else there
when you arrived, other than Mrs. Trayner?

5

A. No one else was there.

6

7

Q. What did you observe when
you arrived?

8

9

10

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14

A. That Phyllis was there alone
and sitting and watching the TV, and had - she
was watching every newschannel to see if she
could catch anything on Sue Nelles. She also
had quite a few papers stacked up beside her and
all the articles on Sue's arrest. My mom asked
her "why don't you turn off the TV and come back
with us and just have a girls' night", and she
said, no, she didn't want to.

15

16

Q. What was Mrs. Trayner's
emotional state as you observed when you arrived?

17

A. She was very upset.

18

19

20

Q. Were you as well upset by the
news of the additional charges that you had heard
about that day?

21

A. Yes, I was.

22

23

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Q. When you say there were news
clippings there concerning Susan, can you explain
for me exactly what you do recall?



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A. Just a stack full of papers,
of every type of paper.

Q. And as a result of your
discussions with - do you recall anything else
that was discussed between Mrs. Trayner and yourself
that evening?

A. Other than asking her to come
back and she said, no, I can't recall anything else.

Q. How long did you stay there?

A. Not very long, I would say
only an hour or so, less than an hour.

Q. Did Mrs. Trayner leave with
you and come back to your house?

A. No, she said she wanted to
stay.

Q. Was your mother there the
whole time that you were with Mrs. Trayner?

A. Yes, she was.

Q. Did you watch TV with her,
watch the news stations as she had been when
you arrived?

A. I didn't watch the news, I
tried to talk to Phyllis.

Q. And did you in fact speak to
her?



B5

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2

A. Yes, I did.

3

Q. Did you during the course

4

of any of your interviews with representatives of

5

the Metropolitan Toronto Police, or either of the

6

Crown Attorneys who were involved in the preliminary

7

hearing, mention to any of them the two discussions

8

that you had with Phyllis Trayner that you have

9

just outlined to us, the one on March 25th and the

visit to her home on March 27th?

10

A. No, I didn't.

11

Q. Can I ask you why not?

12

A. I didn't think they were

13

important so I didn't discuss them.

14

Q. Were you asked about any

15

further discussions you may have had with them

on either of those two days?

16

A. I don't recall.

17

MS. CRONK: Thank you, I have

18

no further questions, sir.

19

THE COMMISSIONER: Thank you very

20

much. Mr. Olah. ~

21

MR. OLAH: I have no questions.

22

THE COMMISSIONER: Yes, thank you.

Mr. Brown.

23

MR. BROWN: Mr. Knazan has an

24

25



1
2 engagement.

3 THE COMMISSIONER: Oh, yes.

4 MR. KNAZAN: I have asked Mr.
5 Brown and Miss Forster, but I have not asked Mr.
6 Percival or Mr. Hunt, but I won't be available
7 tomorrow.

8 THE COMMISSIONER: All right. I take
9 it this last minute request doesn't disturb anybody?
10 All right Mr. Knazan.

11 MR. KNAZAN: I will be about twenty
12 minutes.

13 CROSS-EXAMINATION BY MR. KNAZAN

14 Q. My name is Grant Knazan and
15 I represent Mrs. Christie. Do you recall the names
16 of the children you had in 418 on March 20th?

17 A. The family names?

18 Q. Yes, could you refer perhaps
19 to the -

20 A. The sheet is still sitting
21 here, can I use these?

22 Q. The assignment book?

23 A. No, the sheet that was here
24 was still sitting here that I wrote out.

25 Q. Yes.

A. I don't have their last names



B7

1
2 here, so if I could have the assignment book I
3 could tell you exactly.

4 Q. Do you have the assignment
5 book there Exhibit 32A.

6 A. No, I don't.

7 Q. This is page 179?

8 A. That's right. Do you want me
9 to go over what I have?

10 Q. Yes.

11 A. I had these to answer.

12 Q. Adario and Villeux?

13 A. And these two.

14 Q. Boissenault

15 A. Kjeldsen

16 Q. The question on page 179 of
17 Exhibit 32 A the witness is indicating the first
18 two names under Miss Mandal's name, and the first
19 two names under Mrs. Scott's name.

20 Now do you recall testifying
21 at the preliminary that you had a baby called
22 Harpin?

23 A. No, I don't.

24 Q. I just refer you to your
25 evidence at Volume 6, page 1443, do you have that?

A. No, I don't.



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Q. I can read it, it is only two lines.

MR. OLAH: I would point out that at the time of the preliminary enquiry Miss Brownless didn't have the benefit of those notes that were prepared.

MR. KNAZAN: Yes, I understand.

MR. OLAH: Which outlined the name of the baby she had that evening, and it is not clear from the transcript whether she had the benefit of the assignment book either Mr. Knazan. But if you want to put that inconsistent statement to her, by all means.

MR. KNAZAN: I am not attacking your client for her inconsistencies.

MR. OLAH: I realize that.

MR. KNAZAN: I am just trying to clarify which baby my client had.

THE COMMISSIONER: Was there a child - what name did you say?

MR. KNAZAN: Harpin, Volume 6, page 1443.

THE COMMISSIONER: Yes.

MR. KNAZAN: I think by her first answer she has confirmed that was an error that



B⁹

1

2

she may not have had the assignment book.

3

A. What page?

4

Q. Page 1443, Volume 6 of the
preliminary enquiry, line, starting line 5:

5

6

"Q. All right. Do you remember
the names of any of the other babies
that you had.

7

8

A. If I looked on here I could
probably tell you.

9

10

Q. All right.

11

A. Harpin and Bouissenault"

12

I think from what you have stated
this morning you would agree that Harpin was Mrs.
Christie's baby?

14

A. That's correct.

15

16

Q. Do you recall if Mrs. Christie's
baby was a very ill baby, or a less ill baby?

17

18

A. I can't recall what condition
her baby was in.

19

20

Q. At page 1477 in the same
Volume, Volume 6.

21

A. 14 --

22

Q. 1477, line 10, it was
suggested to you:

23

24

25



1
2 B10 "Q. Was the baby that Mrs.
3 Christie looked after in that
4 category, that is not as serious
5 as Justin Cook?
6 A. Wasn't very ill no.
7 Q. He wasn't very ill?
8 A. No."
9 Do you recall being --
10 A. Where do you see this? Oh,
11 yes, I recall saying that.
12 Q. But if I were to point out
13 to you that Thomas Harpin was a very ill baby
14 having come from ICU very recently, and was on two
15 hour vitalsigns, you wouldn't disagree with that,
16 is that correct?
17 A. That's correct.
18 Q. Now the night that Janice
19 Estrella died, which was January 11th, do you
20 ever recall seeing Sui Scott or Phyllis Trayner
21 at the nursing station at the same time?
22 A. I can't say for sure.
23 Q. I'm going to read to you
24 some of the evidence of Miss Parcels at the
25 preliminary enquiry relevant to that and ask if
that assists you in recalling. That is in Volume
20 of the preliminary hearing, page 22.



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Q. That is at Volume 20 of the preliminary inquiry on page 22, starting at page 21, line 28. Do you have that?

A. No, I don't.

Q. It is very short and I will read it to you; if you require it, I will bring it up to you and you can read it.

A. Okay.

Q. This isn't your evidence.
This is Mrs. Parcels':

"Q. I understand that you were with some of these people and others at the nursing station when you heard a call from the room that Janice Estrella was in?"

"A. Correct."

"Q. I wonder if you could just tell His Honour where you were and who you were with immediately before the call for the emergency as far as Janice Estrella is concerned?"

"A. We were in the back of the nurse's station, at an area with tables."

"Q. Who were you with there?"

"A. Phyllis Trayner."



C2

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"MR. COOPER: With whom? Sorry."

3

"A. Phyllis Trayner, Bertha Bell."

4

"MR. MCGEE: Q. Bertha Bell?"

5

"A. Janet Brownless."

6

"Q. Janet Brownless?"

7

"A. Sui Scott."

8

"Q. Sui Scott?"

9

"A. And that's all I can remember."

10

Later in cross-examination, Miss
Parcels told Mr. Cooper that both Phyllis Trayner
and Sui Scott were at the nursing station at the
same time.

11

12

Do you recall that?

13

14

A. No. I recall being at the
nursing station and hearing Sue call out from Room
423.

15

16

17

Q. So, you, at no time that
evening, saw both Sui Scott and Phyllis Trayner out-
side of Estrella's room?

18

19

A. As best I can remember, no,
I never saw them together at the nursing station.

20

21

Q. Is it possible that could
have occurred?

22

23

A. I can't say so.

24

25

Q. On March 21st, when Justin



C3

1

2

Cook died, you said that Susan Nelles fed one of your babies.

3

4

A. That is right.

5

6

Q. And you think it is the one whose first name is Jadina?

7

8

A. That's right.

9

10

Q. Did you ask her to feed the baby?

11

12

A. I can't remember if she offered or I asked.

13

14

Q. You can't recall?

15

16

A. I think she asked if any of my children were to be fed, and I offered Jardina.

17

18

19

Q. Just to be fair, I want to tell you that it will probably be the evidence of Mrs. Christie that you asked Susan Nelles if she would feed Jadina . and she remembers that very clearly.

20

21

22

23

24

25

A. I can't recall.

Q. You can't recall.

And you also testified, Miss Brownless, that the night that McKeil died - it was very early after you started to have patient duties - and you asked both Mrs. Christie and, later, Phyllis Trayner what an RNA was supposed to do on arrest; is



C4

1

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that correct?

3

A. That is right.

4

Q. Was there no mention or

5

discussion of what an RNA should do on arrest at
your orientation?

6

7

A. I can't recall if there was
or not. I don't think so.

8

MR. KNAZAN: Thank you very much.

9

Those are all my questions.

10

THE COMMISSIONER: Thank you.

11

Mr. Brown.

12

CROSS-EXAMINATION BY MR. BROWN:

13

Q. Miss Brownless, my name is

Brown and I act for Miss Nelles.

14

15

You started to work at the Hospital

16

some time in August of 1980 and from that period of

17

time until the arrest of Susan Nelles, you had an
opportunity to work with Susan Nelles, did you not?

18

A. That is right.

19

Q. And, indeed, your counsel

20

has provided us with a sheet which indicates you were
on for approximately 26/27 of the Phyllis Trayner
team shifts during that period of time.

21

22

A. I can't recall the exact

23

number.

24

25



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2

Q. Somewhere --

3

A. In the twenties.

4

Q. 25 or so. And, presumably,

5

when you were on those shifts, Miss Nelles, most of

6

the time, would also have been working on the

7

Phyllis Trayner team and you would have been working

with her; is that a fair assumption?

8

A. Yes, it is.

9

Q. From the period, from working

10

with Miss Nelles, what opinion did you form of

11

Miss Nelles' abilities as a nurse?

12

A. I thought she was a very good

nurse.

13

Q. And being able to work with

14

Miss Nelles, could you tell me how you got along

15

working with Miss Nelles?

16

A. I got along fine with her.

17

Q. Did you have any problems

working with her?

18

A. Not that I can recall.

19

Q. And indeed, I believe Miss

20

Nelles oriented you to the cardiology floor?

21

A. No, she oriented me to long

22

nights. She was in charge that night Phyllis was

23

off.

24

25



1

2

Q. From your observations, how
did Miss Nelles appear to get along with the other
nurses on the floor?

4

5

A. That weekend?

6

Q. During the period of time
that you worked with Phyllis Trayner or with
Miss Nelles, from your observations, how did Miss
Nelles appear to get along with the other nurses on
the floor?

9

10

A. As far as I know, fairly

11

well.

12

Q. Did she seem to be a fairly
sociable sort of person?

13

14

A. To certain people she was
close friends to, yes.

15

16

Q. Both your own counsel and
Miss Cronk have reviewed with you the events on the
night of Justin Cook's death. There were a couple
of questions that I wanted to ask you.

18

19

First, do you ever recall, during
the evening of March 21st or the early morning of
March 22nd, seeing Susan Nelles feed Justin Cook?

21

22

A. No, I don't recall Susan
feeding Justin.

23

24

Q. You do recall some time, if

25

C6



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C7

2

I recall, around eleven o'clock or midnight, that there
was a discussion about the lockup of digoxin?

3

4

A. That is right.

5

Q. Phyllis Trayner came into

Room 418?

6

7

A. That is right.

7

8

Q. You recall her having some
discussion with Susan Nelles, which you did not
overhear?

9

10

A. That is right.

11

Q. Phyllis Trayner left the
room?

12

13

A. I can't recall what time
she left the room. She left the room, yes, that is
right.

14

15

Q. Susan Nelles asked you to go
out and see what all the flap was about, or something
to that effect?

17

18

A. That's right.

19

Q. You then went out and spoke
with Mrs. Trayner and Mrs. Bell?

20

21

A. That is right.

22

Q. You then came back in and
those two ladies also came back into 418?

23

A. As best as I can recollect,

24

25



1
C8 2 they both came in.

3 Q. And you think that they then
4 discussed with Miss Nelles the fact that digoxin was
5 being locked up on the ward that night?

6 A. I don't recall what the
7 conversation was about, but I think it was along the
8 line of locking up digoxin.

9 Q. And do you recall that that
10 series of events happened shortly after the movie
11 "Gone With The Wind" was over?

12 A. That's right.

13 Q. And you recall that the
14 movie was over?

15 A. Yes, I do.

16 Q. Miss Nelles had been watching
17 the movie at times?

18 A. Yes.

19 Q. And you, yourself, had been
20 watching the movie at times?

21 A. Yes.

22 Q. You also recall around that
23 time Miss Nelles taking a break and Phyllis Trayner
24 relieving her?

25 A. What time are we talking?

Q. Around midnight.



C9

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2

A. That is right.

3

Q. And when Mrs. Trayner came

4

in to relieve Susan Nelles, do you recall seeing

5

Susan Nelles and do you recall Susan Nelles saying

6

anything to the effect that she was going to go down
and get a newspaper?

7

A. Would you ask me that

8

question again, I'm sorry.

9

Q. When Mrs. Trayner came in to

10

relieve Susan Nelles for her break --

11

A. That is right.

12

Q. -- do you recall Susan Nelles

13

saying she was going to go and get a newspaper?

14

A. Yes, I do.

15

Q. Did you see Miss Nelles at

16

any time after that with a newspaper?

17

A. I don't recall if I saw her

18

or not.

19

Q. You also stated yesterday

20

that around three o'clock the following morning Susan
Nelles fed one of your children and you believe that
was the child Jadina?

21

A. That is right.

22

Q. And the notes I took of your

23

testimony yesterday indicated that you couldn't recall

24

25



1
C10 2 whether you were present in the room when Miss
3 Nelles actually fed Jardina?

4 A. That's right.

5 Q. Could I refer you to the
6 handwritten note that you prepared after you were
7 interviewed by the police, our Exhibit 379.

8 If you could please turn to the
9 second page of those notes. There is an entry starting
10 at 0300.

11 Do you have that?

12 A. Yes, I do.

13 Q. And at least at that time,
14 shortly after you had been interviewed by the
15 police, you wrote:

16 "Sue offered to feed Jadina.. Sue
17 got bottle for him from fridge. I
18 watched Justin. Jadina crib beside
19 Justin crib. Sue fed Jadina 60 cc.
20 Isomil 24 and rocking her. I finished
21 feeding Robin, rocked a bit, settled
22 in crib. Left room about 0330 to put
23 on coffee."

24 With the benefit of those notes that
25 were made very shortly after the event, do you now
recall seeing Miss Nelles feeding the child Jadina



1

C11

2

and rocking the child?

3

A. I can't recall seeing her

4

feeding her but I can recall her rocking her.

5

Q. You can recall her rocking

6

her? Do you recall whether that would be after the
feeding?

7

A. Yes, it was.

8

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Q. Well, the notes that you made here indicate that Sue got a bottle for Jadina. I take it from the fridge. Do you recall Miss Nelles getting a bottle for the baby from the fridge?

A. I can't recall her going across the hall and getting the bottle, no, but there is the possibility that she did.

Q. Would any of the bottles be stored in Room 418?

A. He was on a higher calorie and it was kept in the fridge right across the hall and we usually got them just before the child was due to be fed.

Q. So, as a normal matter of course you would have to go across the hall to get that type of formula?

A. That's right.

Q. And you also indicated here "Sue fed Jadina". Is it possible then that you actually observed Miss Nelles feed Jadina?

A. There is a possibility but I don't recall.

Q. Okay. Well, these notes were made one or two days after you had been



1
2 interviewed by the police?

3 A. That's right.

4 Q. So, that would have been
5 four or five days after the events had occurred?

6 A. That's right.

7 Q. At the risk of being trite,
8 I take it that one of the major duties that you
9 have as an RNA, and one of the major duties as a
10 nurse, is to observe the children; is that right?

11 A. That's right.

12 Q. You spend a lot of your
13 time looking at the children and taking their vital
14 signs, seeing what their condition is like.
15 Observation plays a large part in your job, does
16 it not?

17 A. That's right.

18 Q. Not only do you have to
19 observe the child you also have to interpret what
20 you see, don't you?

21 A. That's right.

22 Q. In the sense that if the
23 vital signs are showing a particular course you
24 might be able to interpret them as saying this
25 child now appears to be fairly stable; that's one
possible interpretation?



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2

A. That's right.

3

Q. The child might be improving?

4

A. That's right.

5

Q. And also in certain cases
the child might be deteriorating?

6

A. That's right.

7

Q. Would it be fair for me to
say that when you first came on to the cardiology
ward your experience with young children with these
serious cardiac diseases was rather limited?

10

11

A. That's right.

12

Q. This was a new area of
nursing upon which you were embarking?

13

14

A. I had worked in paediatrics
but not dealing with cardiology.

15

16

Q. And cardiology presents certain
unique problems, does it not?

17

A. That's right.

18

19

20

21

22

Q. And would it be fair for me
to say that when you first came on the ward and
started to care for the children you might not
have been able to pick up some of the signs and
changes in a child that a more experienced nurse
would have picked up?

23

A. That's right.

24

25



1
2 Q. And indeed as part of your
3 education you were trained by other nurses to pick
4 up these signs, weren't you?

5 A. That's right.

6 Q. And I would take it today
7 that you are probably much more capable in
8 observing and interpreting certain signs of a
9 child than you were three years ago when you started
10 on the cardiology service?

11 A. That's right.

12 Q. Would it be also fair for me
13 to say that the more experience that you gain with
14 the children the more you observe the children, the
15 more opportunity you have to interpret their vital
16 signs, you begin to develop a certain feel for
17 children?

18 A. Yes.

19 Q. There is an element of
20 intuition involved in nursing, is there not?

21 A. I don't understand what you
22 mean.

23 Q. Well, as a nurse you look at
24 a child and you physically take their vital signs,
25 do you not?

26 A. That's right.



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Q. And the vital signs of course are very significant?

A. That's right.

Q. You are able to observe changes in a child, changes in colour?

A. Yes.

Q. Changes in respiration?

A. Yes.

Q. And to some extent those are facts, they are factual things that you observe?

A. That's right.

Q. But in addition to the hard facts that you observe do you not over a period of time begin to develop something else, an intuition for a child, a feeling for a child that this child might be restless?

A. I really can't say for sure if we get that feeling or not.

Q. Well, has it been your experience that you sometimes develop an intuition about the condition of a child, you are able to sense things, that the child might be irritable although upon looking at the child he might not be manifestly irritable?

A. I would really have to know



1
2 the child to know what he was like before. I
3 can't honestly answer that question.

4 Q. Well, that is precisely what
5 I am trying to say. You do deal with the children
6 on an ongoing basis, do you not?

7 A. That's right.

8 Q. And when you work a shift
9 you quite often work 12 hours with a group of
10 children, or a small group of children, don't
11 you?

12 A. That's right.

13 Q. And indeed you might work
14 three, four, five days with the same child?

15 A. Not necessarily, no.

16 Q. But on occasion you do?

17 A. Not three or four or five
18 days, we only work three days in a row at the most.

19 Q. Well, during a three day shift
20 you may on occasion be assigned to the same child
21 each of the three days, may you not?

22 A. That's right.

23 Q. So, there is a continuity in
24 your contact with the children?

25 A. Yes, there is.

Q. And if you have that continuous



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contact with the children, don't you develop some
sort of a feel for the child?

A. Yes, you do.

Q. You develop a sense?

A. I would say you would learn
the child's habits, yes.

Q. And you are perhaps able to
sense things in a child that a nurse who wasn't as
familiar with the child wouldn't be able to sense?

A. There is the possibility, yes.

Q. Yes, there is a certain
intuition, as you grow more familiar with the
child you are able to get a feeling for how the
child is doing?

A. Yes.

Q. And a nurse who comes cold
into the situation may not have that feeling for
a child that you do have?

A. That's true.

Q. Would you agree with me that
it is a fairly important part of nursing for a
nurse to develop this feeling for a child?

A. Fairly important, yes.

Q. And it is a very useful tool,
is it not, it gives you an advantage over a nurse



1
2 who hasn't seen the child, you might be able to
3 pick up something more readily than a nurse coming
4 in cold would be, is that not right?

5 A. That's right.

6 Q. So, in a way this intuition
7 or a feeling is a very valuable asset of a nurse
8 or a registered nursing assistant such as yourself?

9 A. Yes, it is.

10 Q. And we heard some discussion
11 the other day about a conversation that you may
12 have had with Nurse Rankin and the word "sixth
13 sense" came out. Now, quite apart from what you
14 said with Miss Rankin you explained what you thought
15 you said to her, I simply put it to you that for
16 a nurse to have an intuition or a sixth sense about
17 a child is nothing to be ashamed about, is it?

18 A. I don't recall saying sixth
19 sense.

20 Q. I am not saying that you did.
21 All I am simply saying is that for a nurse to
22 develop an intuition, a feel or a sixth sense for
23 a child can be quite a valuable asset in a nurses'
24 arsenal, so to speak, is it not?

25 A. Yes.

Q. And it's nothing to be



1

2

ashamed about?

3

A. No, it's not.

4

5

Q. And indeed it can enhance
the nursing care a nurse is able to give, can it
not?

6

A. Yes, it can.

7

8

9

Q. Because a nurse who does
have this intuition or feeling has a much greater
advantage over a nurse who really doesn't know
anything about a child, does she not?

10

11

A. A fairly new nurse, yes.

12

13

Q. That's right. And indeed
on occasion may be able to detect things in
advance of a nurse who really doesn't have the feeling
for the child?

14

15

A. That's right.

16

17

Q. You related to Miss Cronk
an incident which you believe occurred with Baby
McKeil. This would have been the first arrest in
which you were involved, I believe it was some
time in October?

20

21

A. That's right.

22

Q. During the course of that
evening you were not assigned to the Baby
McKeil, were you?

23

24

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A. No, I wasn't.

3

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Q. You really didn't have an opportunity to observe and monitor the child?

5

6

A. I might have seen him but I don't recall. I had a child in that room also.

7

8

9

Q. But in terms of checking the vital signs, monitoring on an ongoing basis the condition of the child, that was not your responsibility?

10

A. No, it was not.

11

12

Q. It was the responsibility of the nurse assigned to the child?

13

A. That's correct.

14

Q. And that nurse was Miss Nelles?

15

A. That's right.

16

17

18

19

Q. All right. So, to that extent in terms of being able to assess the condition of a child, you would agree with me that Miss Nelles would be in a much better position than you to assess the condition of the child?

20

A. Yes, she would.

21

22

Q. And that really goes without saying?

23

A. That's right.

24

25



1
2 Q. I believe when Miss Cronk
3 went through this scenario with you you agreed
4 with Miss Cronk that it was possible that Susan
5 Nelles and Phyllis Trayner had been in the room,
6 they observed that the child had encountered some
7 difficulty, they decided to bring in some of the
8 arrest drugs, they then went to call the doctor,
9 the doctor came in and a Code 25 was subsequently
10 called. I believe you agreed with her that that
11 is a possibility?

12 MR.OLAH: Excuse me, that question
13 contains a lot of different questions. What is
14 my friend referring to when he talks about that
15 as a possibility. Is he saying that's the witness'
16 evidence and that's the way to put it. If he's
17 talking about the possibility of something, then
18 I would like him to focus or isolate on what he is
19 referring to.

20 MR. BROWN: Q. Miss Cronk reviewed
21 with you your recollection of what happened that
22 night.

23 A. That's right.

24 Q. And although my friend has
25 perhaps -- I believe after she did review those
events with you Miss Cronk asked you whether it



1
2 was possible that what had happened is that the
3 two nurses who were in the room observed the
4 child deteriorate., decided as a precaution to
5 bring in the drugs and then notify the doctor, the
6 doctor came and a Code 25 was called. I believe that
7 you agreed with Miss Cronk that that was a
possibility?

8 A. Yes, I did.

9 Q. And would you agree with me
10 today that that is a possibility?

11 A. Yes, I would.

12 Q. Could I also perhaps ask
13 you to take a look at the McKeil medical record.
14 Mr. Registrar, I believe that is Exhibit No. 62.

15 Could you please, Miss Brownless,
16 turn to page 80 of the chart.

17 A. I have it.

18 Q. There is an entry on that
19 page commencing with the time 0345. It appears
20 that the sequence of events as recorded in the
21 early part of that entry are as follows:

22 Alarm sounded on monitor and apex
23 recorded approximately 80 per minute range. The
24 next thing, is that on oscillation?

25 A. Yes.



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Q. Apex was irregular and approximately 120. The next, Dr. Telch was notified and arrived; next, heart rate again dropped and this time on oscillation no beat was heard and monitor indicating fluttering; next, a Code 25 was called.

Reviewing that note, would you agree with me that the sequence of events as recorded appears to suggest that the cardiac monitors sounded. That's the first event?

A. That's right.

Q. And I believe you said that you do not recall hearing the cardiac monitor?

A. That's right.

Q. It was the emergency buzzer you heard?

A. That's right.

Q. The monitor sounded and there was an observation of the child's apex, that was the first event as recorded here?

A. I wasn't in the room but according to this, yes.

Q. The second event is an observation of the, I guess heart pattern on the oscilloscope.



1

2

A. That's right.

3

4

Q. The third event is the
notification of a doctor and the doctor's arrival?

5

A. That's right.

6

7

Q. The fourth event is, there
is a further observation of the activity of the
heart?

8

A. That's right.

9

10

Q. The fifth event is the calling
of a Code 25?

11

A. That's right.

12

13

14

15

Q. If you would turn with me
to the following page, page 81, the first entry
at 0344 indicates that Dr. Telch called and here,
which would suggest that the doctor was notified
and arrived at the room?

16

A. That's right.

17

18

Q. The next entry of 0348 is
a 25 call?

19

A. That's right.

20

21

22

Q. And you would agree with me
that if that chronology is correct it appeared that
the doctor was notified and arrived prior to the
call of the arrest?

23

A. That's right.

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Q. On the basis of that recorded chronology, would you agree with me that there is another possible interpretation that the two nurses in the room saw the child deteriorating, notified the doctor, the doctor may have suggested that certain drugs be prepared, the doctor then came and some time later the Code 25 was called. Is that another possible interpretation?

A. I can't say what the doctor suggested or if he asked them to draw up drugs or not.

Q. I know you can't say that and I'm not asking you to say whether or not he did, but it would be possible for a doctor to suggest that certain medications be prepared, would it not?

A. I can't say for sure.

Q. Okay. Yesterday Miss Cronk reviewed with you the events of Monday, March 23rd and in particular the meeting that you attended at Liz Radojewski's house?

A. That's right.

Q. The recollection you had of those events was somewhat sparse. You did however recall overhearing Susan Nelles make one remark, the remark being 'I or we haven't done anything



1
2 wrong and we have nothing to worry about'. Do
3 you recall Susan saying that?

4 A. That's right.

5 Q. You said yesterday that the
6 remark struck you as unusual because 'I did not
7 know why she said it'.

8 A. That's right.

9 Q. At the time the remark did
10 strike you as unusual?

11 A. Yes, I did.

12 Q. Did you know that Susan
13 Nelles had been assigned to and had cared for Kevin
14 Pacsai on the long night shift prior to his death?

15 A. No, I didn't.

16 Q. You did not know that the
17 Monday that you had the meeting at Liz Radojewski's
18 house?

19 A. That's right, I didn't know.

20 Q. Did you know that night that
21 Susan Nelles is recorded as having administered a
22 dose of digoxin to Pacsai at 9:00 p.m?

23 A. No, I did not know that.

24 Q. Did you know again, Monday
25 March 23rd, that a coroner's inquest was a distinct
possibility in respect of this child's death?

A. I did not know, no.



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Q I take it then you would not know that one of the reasons there possibly would be an inquest is if they thought there might be some involvement of digoxin in this child's death, you didn't know that, did you?

A No, I didn't.

Q Did you know that Liz Radojewski had phoned Susan Nelles at her home, or her parents' home in Belleville, on the evening of Wednesday, March 18th to advise Susan Nelles of the inquest?

A No, I did not know.

Q Did you hear at that meeting Susan Nelles talking to Mary Jean Halpenny about whether that 9 p.m. dose of digoxin for Pacsai had been double-checked?

A No, I didn't hear that conversation.

Q You didn't know any of the facts that I just put to you?

A No, I didn't.

Q Well, I suggest to you if you had known all of those facts when you heard Miss Nelles make that comment on Monday night, the comment really wouldn't have struck you as unusual, would it?

A No, it wouldn't.



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Q During August, September and October of 1981, after the arrest of Miss Nelles, there were a series of events at the Hospital and outside the Hospital involving markings, telephone calls and pills in food. Did you ever receive any strange or threatening telephone calls?

A No, I didn't.

Q Were you ever present when any of the markings on lockers or cars were found?

A I wasn't working the same shift.

Q Did you ever observe any of them?

A No.

Q Were you ever present when any pills were found in soup, salad or yogurt?

A No, I wasn't.

Q You never observed any of the pills in those foods?

A No, I didn't.

MR. BROWN: Those are all the questions I have, Miss Brownless, thank you.

THE COMMISSIONER: Thank you.

Miss Forster?

CROSS-EXAMINATION BY MS. FORSTER:

Q Miss Brownless, my name is Elizabeth Forster and I act on behalf of Mrs. Trayner.



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I would like first to discuss with you Baby McKeil, and I understand that you worked the long night shift when that child arrested?

A. That's right.

Q. And I believe you indicated that there were three occasions during that shift when you might have seen Phyllis Trayner in the baby's room?

A. That's correct.

Q. And the first time you said was about 9 o'clock when Mrs. Trayner would have given medications to your patients?

A. Right, the child.

Q. As I understand your evidence you can't specifically recall seeing Mrs. Trayner in the room at that time, but you simply assumed that she might have been there?

A. That's right.

Q. And the second occasion on which you think you might have seen Mrs. Trayner was this incident you have just discussed with Mr. Brown when you saw Phyllis and Susan with the tray of medications?

A. That's right.

Q. And again I understand that you can't specifically recall whether it was that night,



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and you can't specifically recall whether that
incident pertained to Baby McKeil, is that correct?

4

A. That's correct.

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6

Q. And the third occasion when you
saw Phyllis Trayner in the baby's room was when you
heard the baby's buzzer go off and you went to the room?

7

A. That's right.

8

9

Q. And I take it that this is really
the only real clear recollection you have of seeing
Mrs. Trayner in that child's room?

10

11

A. That's right.

12

13

Q. And as I understand your
evidence when you went in the room you saw Bertha Bell,
Phyllis Trayner and Susan Nelles in the room?

14

15

A. That's right.

16

Q. Can you recall what Mrs. Trayner
was doing?

17

A. No, I can't.

18

19

Q. Do you recall whether she was
administering any medications to the child?

20

A. I don't recall what she was
doing.

21

22

23

Q. And I take it you were only in
there for a short time and you went to look back at
the other patients on the ward?

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E.5

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A. That's correct.

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Q. Now, dealing with the incident involving the medications that you say you saw on the tray, and you think it was the night that McKeil arrested. As I understand your evidence you don't know who drew up the drugs?

7

A. That's correct.

8

9

Q. And you don't know what the drugs were?

10

A. That's correct.

11

12

Q. Then you don't know when the drugs were placed on the monitor?

13

A. That's right.

14

15

16

Q. And Mr. Brown took you through the sequence of events the night that child arrested, which are found on page 80 of the chart if you have that in front of you; do you have page 80 of the chart?

17

A. Yes, I do.

18

19

Q. I take it you are not able to tell us whether or not Susan and Phyllis got the drugs after the monitor sounded?

20

A. That's correct.

21

22

23

Q. And would you agree with me if they had gone and obtained the arrest drugs after the monitor sounded and the child deteriorated, that would

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be a prudent nursing practice, wouldn't it?

3

A. I don't understand.

4

Q. Well, if the child's alarm

5

sounded and the heart rate was fluctuating, that is

6

a pretty clear sign that the child is deteriorating?

7

A. That's right.

8

Q. And would you not agree with

9

me that if the child is deteriorating it might be a
prudent nursing practice to run and get some arrest

10

drugs in case you need them?

11

A. Yes.

12

THE COMMISSIONER: Tell me, do you

13

often have these arrest drugs separate from the crash

14

cart? I thought they were all kept on the crash cart,
and brought in on the crash cart?

15

THE WITNESS: They are kept in the

16

top drawer.

17

THE COMMISSIONER: Of the crash cart?

18

THE WITNESS: That's right.

19

THE COMMISSIONER: Well, would someone

20

go to get drugs from a crash cart without getting
the crash cart itself?

21

THE WITNESS: Sometimes. The

22

medications are also kept in the top drawer of the

23

crash cart, and they are also kept in the Med Room.

24

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E.7

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So if they knew what med they wanted they could have gone into the Med Room and drew up the drugs.

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THE COMMISSIONER: Well, I guess you are answering my question, but I don't know.

5

6

THE WITNESS: They could have pushed the crash cart to the outside of the door instead of bringing it all the way to the room, I don't recall that.

8

9

THE COMMISSIONER: Do you use arrest drugs without calling a Code 25?

10

11

THE WITNESS: No drugs can be given without a doctor's order.

12

13

THE COMMISSIONER: Well, here is my trouble. If a child is sick, if a child is sick and you suspect that the child is going to have some difficulty, and perhaps even worried about the possibility of an arrest, do you under those circumstances go to get arrest drugs at all? Do you not, if you are going to have an arrest at all, do you not call a Code 25 and get the arrest team and all the rest of the people?

14

15

16

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THE WITNESS: If the child is deteriorating and has not arrested, usually they will call for the doctor.

22

23

THE COMMISSIONER: Yes.

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THE WITNESS: And if the girl, in this case, if I can recall, could have pushed the crash cart to the outside of the door and brought in the necessary medications and had them drawn up, available.

THE COMMISSIONER: For the doctor?

THE WITNESS: Yes. There are usually certain drugs they used first, so they pump them up ready for when the doctor arrives and he needed them, or wanted them.

THE COMMISSIONER: I don't know what your experience is, Miss Brownless, but we certainly know there are times where they are very much involved in the arrest procedures. Have you been involved in the arrest procedure since then?

THE WITNESS: Yes, I have.

THE COMMISSIONER: And what happens? Have you seen arrest drugs being used by doctors before the arrest itself and before the Code 25 was called?

THE WITNESS: I have seen them give medications before they called the Code, yes.

THE COMMISSIONER: Medications could mean anything, I am really thinking of the sort of drug that you do use to try and get the heart started



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again, that kind of medication?

THE WITNESS: I can't say for sure what medications they are, and our carts are different now, our medications are all kept in a box and locked up.

MR. BROWN: Just so there is no confusion, we have heard evidence before about - from Nurse Bell and Nurse Brownless, it was the practice on occasion to bring the crash cart into the room prior to the Code 25 being called, or to bring medications I believe from the cart into the room prior to the Code 25 being called.

MS. CRONK: The first part of that suggestion accords with my recollection of the evidence, but not the second. Certainly we have heard evidence that the crash cart was brought in on occasion.

THE COMMISSIONER: There is certainly nothing wrong with that kind of preparation.

MS. CRONK: That may be so, but I don't recall that evidence.

THE COMMISSIONER: Now Mr. Roland is going to solve this problem for us.

MR. ROLAND: I am the one acting for the Hospital so I should have better information



E.10

1
2 than I do at the moment about the change in practice
3 and I will try to get that this morning.

4 As I understand it, sir, and I will
5 correct this later if I am wrong. The procedure
6 during the nine months was to draw up drugs from vials
7 and ampules and so on, and other sources, into
8 syringes that were found on the crash carts. So
9 there was an exercise in drawing all these up before
10 they were administered during the arrest. That these
11 from time to time were drawn up before the arrest,
12 or a baby was deteriorating, and there are a lot of
13 very common sort of drugs and medications used.

14 THE COMMISSIONER: I understand that.
15 I was curious about separate from the crash cart
16 itself. I would have thought - not knowing the first
17 thing about it, I would have thought that you would
18 have kept all those drugs in the crash cart and brought
19 the crash cart in.

20 MR. ROLAND: Yes, they were kept in
21 the crash cart, and the crash cart would either
22 be wheeled to the doorway of the room, or into the
23 room, but they had to be drawn up in syringes, there
24 was a mechanical exercise in doing that. As I under-
25 stand it, after these events, there was a thing
introduced called a tackle box which I think the



E.11

1
2 witness has referred to, where there were three
3 drawn-up syringes, you didn't have to go through the
4 mechanical exercise, it had already been done. I
5 will get the date for you when that was introduced,
6 I think it was shortly after these events, probably
7 in April of 1981. So that the exercise of preparing
8 it all had already been done and it was contained in
9 this tackle box. They didn't have to go through
10 the mechanical exercise that this witness has
11 referred to when she says, she saw the drugs beside
12 McKeil's bed, someone had gone through that mechanical
13 exercise to shorten the time frame in the arrest
14 procedure, if it occurred.

14 THE COMMISSIONER: The only thing
15 though that really is concerning me is the fact that
16 the drugs were separated from the crash cart. I had
17 been under the impression that the crash cart itself,
18 when any kind of an arrest procedure, or a counter
19 arrest procedure was undertaken it was undertaken
20 with the crash cart right there beside the baby's
21 crib where the doctor can -- I hadn't understood that
22 anyone ever took arrest drugs from the crash cart,
23 or from the medication room, or any place else and
24 put them in anything other than the crash cart, that's
25 all.



E.12

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MR. ROLAND: Maybe I can go over this again. You see, during an arrest, or before an arrest, the drugs have to be taken from the crash cart and actually drawn up.

THE COMMISSIONER: I agree, but the crash cart is right in the room, right beside the bed, right there, all of the drugs that they need are there, that was my understanding.

MR. ROLAND: Yes.

THE COMMISSIONER: Now it may be that in some instances they may draw up drugs and take them away from the crash cart, leaving the crash cart in the hall or wherever the crash cart is, and take them to the baby's bed, and it may be that that makes sense. I am surprised that it makes sense, but it might, it might. You say that is done some times.

THE WITNESS: I only saw it on one occasion.

THE COMMISSIONER: I am really talking about your experience now, do you ever know of an arrest drug being brought in separately from the crash cart, or whatever contraption you have now?

THE WITNESS: Our medications are kept in a tackle box which is locked.

THE COMMISSIONER: Yes.



E.13

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THE WITNESS: And if an arrest is called usually they have to unlock the box and everything is pre-drawn up.

5

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THE COMMISSIONER: Is that tackle box, that is in the crash cart, is it?

7

THE WITNESS: It is on top.

8

THE COMMISSIONER: On top of the crash cart, yes.

9

10

11

MR. BROWN: Mr. Commissioner, the tackle box was introduced after all these events occurred.

12

13

14

THE COMMISSIONER: I know, I understand that. But you still bring, do you bring the tackle box in, or do you bring the whole crash cart in?

15

16

THE WITNESS: I can't say for sure if they brought the cart outside the room or brought the cart and the tackle box into the room.

17

18

THE COMMISSIONER: The tackle box, does it contain most of the drugs that you need?

19

20

THE WITNESS: It contains all the drugs we need.

21

22

THE COMMISSIONER: All the drugs you need. Yes. All right.

23

24

25

Ms. Forster?

MS. FORSTER: Q. Miss Brownless, as



E.14

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I understand it three of the most common medications
used in an arrest situation are sodium bicarbonate;
calcium gluconate and adrenaline, is that correct?

3

4

A. That's right.

5

6

Q. And can they also be used
when a child is deteriorating prior to an arrest?

7

A. I can't say for sure.

8

Q. You don't know?

9

A. That's right.

10

Q. Are those drugs available -

11

were they available on the crash cart during the
nine-month period we are discussing?

12

A. Yes, they were.

13

Q. And were they also pretty

14

easily obtained in the medication room?

15

A. Yes, they were.

16

Q. I take it you don't know where

17

they came from in this case?

18

A. That's right.

19

Q. You mentioned that no drugs

20

can be given without a doctor's order, did you see
either Phyllis or Susan administering any of these
medications?

21

22

A. No, I didn't.

23

Q. And if you will turn to page 81

24

of the chart?

25



E.15

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A. I have it.

3

Q. Would you agree with me that

4

at least some of these medications were administered

5

by what appears to be Dr. Telch? You see at 357

6

sodium bicarbonate Dr. Telch: 359 calcium gluconate

7

by Dr. Tilch; again at 406 calcium gluconate; 407

8

adrenaline?

9

A. Yes.

10

Q. Those medications all seem to

have been administered by the doctor?

11

A. That's right.

12

Q. I take it from what you told

13

Mr. Brown you don't know whether Dr. Telch told either

14

Susan or Phyllis to have those drugs on hand when the

call was made for him?

15

A. That's correct.

16

Q. And I take it from your evidence

17

that you said you didn't - when you saw these

18

medications there you didn't regard the situation as

19

unusual?

20

A. No, I didn't.

21

Q. And neither Miss Nelles or

22

Mrs. Trayner seemed startled when you came into the

room and saw them with the drugs?

23

A. No, they didn't.

24

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Q. You also gave evidence yesterday
that some time after Christmas of 1980 and before
March 6th, 1981, Mrs. Trayner said to you that we
were coming up to the "witching hour", do you recall
giving that evidence?

A. Yes, I do.

Q. And I believe you said Mrs.
Trayner was referring to the early hours of the
morning.

A. That's right.



1
2 ar84 Q. Do you recall the context
3 rc in which that was said?

4 A. I recall standing at the
5 nursing station and it was approaching midnight, or
6 after midnight - I can't say for sure - and she
7 said, "We're coming up to the witching hour".

8 Q. And what did you say?

9 A. I don't recall what I said.

10 Q. Would you agree with me, by
11 the time Mrs. Trayner had made that remark, there
12 had been a great many deaths on the cardiology ward
13 in the presence of the Trayner team?

14 A. I can't say how many, but
15 I believe there were deaths on her team.

16 Q. Quite a few deaths on her
17 team?

18 A. I can't say for sure. I
19 never counted them.

20 Q. Would you agree with me that
21 most of the deaths that had been occurring were
22 occurring in the early hours of the morning?

23 A. Yes.

24 Q. Okay. And the members of the
25 Trayner team were quite upset by the number of deaths
that were occurring while they were on duty?



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A. I know they were under stress.

3

Q. They were concerned about the

4

situation?

5

A. But I can't say it was caused

6

by the number of deaths, because I wasn't aware of
how many deaths they had.

7

Q. All right. In view of the

8

number of deaths they were experiencing when they

9

were on long night duty, would you agree with me that

10

perhaps, to them, the early hours of the morning did

11

appear to be a "witching hour" for them?

12

A. Yes.

13

Q. And you didn't take from

14

what Mrs. Trayner said to you that she thought there

15

was anything humorous or amusing about the number of
deaths?

16

A. No.

17

Q. And, in fact, I would suggest

18

to you that she was very concerned about the number

19

of deaths that were occurring while her team was on

20

duty; would you agree?

21

A. I can't say how I interpreted

or how I felt when she said that.

22

Q. All right.

23

Next, dealing with Baby Estrella, if

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I can just recap your evidence again, I think you said you presumed that Mrs. Trayner relieved Sui Scott for breaks the night that Estrella died, but you have no specific recollection of that.

A. That is correct.

Q. Right. And I take it then you have no recollection of seeing Mrs. Trayner in Baby Estrella's room at all the night she died?

A. I can't say for sure if I saw her or not.

Q. So you have no specific recollection at this time of seeing her in the room?

A. That's right.

Q. And again, with Charlon Gardiner, you said you presumed Mrs. Trayner relieved Sui Scott but you have no specific recollection of seeing Mrs. Trayner relieve Sui Scott?

A. I know she was in the room and I know Sui wasn't in the room, and I just presumed she was relieving her.

Q. Do you recall when you saw her in the room?

A. It was just before Allana Gardiner took her turn.

THE COMMISSIONER: I'm sorry, we're talking about the Gardiner baby.



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2

THE WITNESS: I'm sorry, Gardiner.

3

THE COMMISSIONER: And I think the

4

name --

5

THE WITNESS: They are the same.

6

MS. FORSTER: Charlon Gardiner.

7

Q. You gave evidence yesterday

8

that you did see Mrs. Trayner in the baby's room

when the baby took a turn, I think you described it.

9

Do you recall specifically seeing Mrs. Trayner in the

10

room prior to that?

11

A. Beforehand?

12

Q. Yes.

13

A. I don't know who went in

the room first or who was in the room, her or myself.

14

Q. Now, before the incident

15

where you saw Mrs. Trayner in the room when the baby

16

had taken a turn, do you recall seeing Mrs. Trayner

17

in the room prior to that on the evening that Gardiner

18

arrested?

19

A. Before I saw her, before the

alarm was sounded?

20

Q. Right.

21

A. I can't say for sure.

22

Q. You have no specific recol-

23

lection of seeing her?

24

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No, I don't.

3

Q.

And you said that you did

4

recall seeing Mrs. Trayner in the room just before

5

the child took a turn for the worse?

6

That is right.

7

And do you recall what Mrs.

Trayner was doing?

8

She was tending to one of

9

the other children.

10

Did you see her near Baby

11

Gardiner at all?

12

I don't recall.

13

Q.

Do you recall how long you

14

saw her in the room?

15

A.

I can't say for sure how long

16

it was.

17

Q.

Did you see her administering

medication to Baby Gardiner when she was in the room?

18

A.

I can't recall. I don't think

19

so.

20

Q.

Who left first, you or Mrs.

Trayner? Left the room first.

21

A.

I can't say for sure.

22

Q.

Do you recall seeing Mrs.

23

Trayner in Gardiner's room at any other time before the

24

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child arrested?

A. Before the child...?

Q. Arrested.

A. I can't say for sure.

Q. So, you have no specific
recollection?

A. No.

Q. Okay.

Now, I would also like to review with
you the events that took place the night Justin Cook
died, and I take it from your evidence that you were
first in this child's room at about ten to eight,
eight o'clock in the evening?

A. That is correct.

Q. And you stayed there until
about 10:30 or eleven, when you had your break?

A. That is right.

Q. And while you were in the
room during that period, you fed your four children
and took their vital signs?

A. That's right.

Q. And during that time period,
before you took your break, did you see Phyllis
Trayner in the room at all?

A. Before I took my break?



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2

F7

Q. Yes.

3

A. I can't say for sure, but I

4

presume she was in there doing my medications.

5

Q. Do you have any specific

6

recollection of seeing Mrs. Trayner in the room during
that time?

7

A. No, I don't.

8

Q. And you said that you saw

9

some Inderol taped to Justin Cook's bed?

10

A. That is right.

11

Q. Do you know who put the

12

Inderol there?

13

A. No, I don't.

14

Q. You also indicated that some

15

time between 10:30 and eleven o'clock you left the
room to take your break.

16

A. That is right.

17

Q. And you took a break for

18

20 to 30 minutes?

19

A. As best as I can recall, yes.

20

Q. And you said that just before

21

you finished your break you went up to Phyllis

22

Trayner at the nursing station and said that you

23

were going to get Susan Nelles coffee and Phyllis

24

said, "Don't bother, I am going to relieve her".

25



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A. What was the first part of
the sentence?

4

5

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8

Q. I believe your evidence
was, just as you finished your break, you went to
Mrs. Trayner at the nursing station and said that
you were going to get Susan Nelles a coffee and
Mrs. Trayner told you not to bother because she was
going to go in and relieve Susan.

9

10

11

A. I can't recall whether I was
finished my break or not, but I recall making the
statement.

12

13

THE COMMISSIONER: Before you went
back anyway?

14

15

16

THE WITNESS: Before I went back to
the room, yes.

17

18

19

20

21

MS. FORSTER: Q. So it was some
time during your break?

22

23

24

25

A. Yes.
Q. Okay. And if your intention
was to get Miss Nelles a coffee, would it not make
sense it was probably at the end of your break? It
wouldn't make much sense to get her a coffee at the
beginning and let it go cold?

A. I could have taken it in to
her.



F9

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THE COMMISSIONER: It might be a
conversation about future intention, however.

3

4

MS. FORSTER: Q. In any event,
it was some time during your break you had this
discussion with Mrs. Trayner?

5

6

A. Yes.

7

Q. And after your break, you
went back into Room 418?

8

9

A. That's right.

10

Q. And who was looking after
Justin Cook when you got there?

11

12

A. I can't recall. I think it
was Sue.

13

14

Q. And Mrs. Trayner came in
shortly thereafter to relieve Miss Nelles?

15

16

A. After the conversation and
then she came in to relieve, yes.

17

18

Q. That was shortly after you
came back from your break?

19

A. Yes.

20

21

Q. And do you recall how soon
after you arrived back in the room from your break
that Mrs. Trayner came in to relieve Susan Nelles?

22

23

A. I can't recall how long it
was.

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F10

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Q. Would we be talking minutes
or hours?

A. Less than an hour.

Q. Less than half an hour?

A. I can't say for sure.

Q. And Mrs. Trayner then came
in to relieve Susan Nelles?

A. As best I can recall, yes.

Q. And was it on this occasion
that Mrs. Trayner asked Miss Nelles to lock up the
digoxin?

A. Yes, it was.

Q. And she gave Miss Nelles
the keys to the narcotics cupboard?

A. Yes, she did.

Q. And you indicated that Miss
Nelles then took a break for approximately a half hour?

A. That's right.

Q. And do you recall seeing
Miss Nelles come back from her break?

A. Yes, I do.

Q. And do you recall hearing
Miss Nelles tell Mrs. Trayner the digoxin had been
locked up?

A. No, I don't.



F11

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Q. Do you recall hearing any discussion at that time about the digoxin being locked up?

A. No, I don't.

Q. Do you recall hearing Miss Nelles tell Mrs. Trayner she was just going to go down and get a newspaper and she would be right back?

A. I recall her saying she was going to leave the floor, yes.

Q. And do you recall how long she was gone?

A. I was in the room, in and out, and I wasn't watching Susan's movements, so I couldn't say how long.

Q. All right. During the time that Mrs. Trayner was relieving Susan Nelles, were you in the room the whole time?

A. I can't say for sure.

Q. If you weren't in the room the whole time, is it fair to assume you were in and out pretty regularly?

A. Yes.

Q. All your children that night were in Room 418, weren't they?



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F12 2

A. That is right.

3

Q. So you would have no reason

4

to be anywhere else, other than, say, the linen

5

room or the formula room or something like that?

6

A. That's right.

7

Q. Now, when Miss Nelles returned

8

from her break, do you recall seeing her give Justin

9

Cook his midnight Inderol?

10

A. I don't recall any medications

being given to Justin.

11

Q. All right. You don't recall

12

then Miss Nelles checking the Inderol with Mrs.

13

Trayner?

14

A. No, I don't.

15

Q. Okay. During the time that

16

Mrs. Trayner was relieving Susan Nelles, do you

17

recall seeing Justin Cook in an oxygen hood?

18

A. I can't say for sure.

19

Q. Okay. Do you recall Mrs.

20

Trayner trying to settle the child and giving him a

21

pacifier?

22

A. I recall her feeding him.

23

Q. Do you recall her trying to

24

settle the child and giving the child a pacifier?

25

A. I recall her rocking the child

26



F13 1
2 in a chair, but I can't recall the pacifier.
3 Q. Now, you have just indicated
4 that you think it was during this first break that
5 you saw Mrs. Trayner feed Justin Cook?
6 A. That's right.
7 Q. And you indicated that she
8 was feeding him a clear liquid.
9 A. That is right.
10 Q. And was she feeding the child
11 from a bottle?
12 A. Yes, she was.
13 Q. And was it the type of
14 bottle that you expect to find sugar water in?
15 A. Yes.
16 Q. Did the substance in the
17 bottle look like sugar water?
18 A. As best as I can recall, yes.
19 Q. Sugar water, I take it, is
20 clear?
21 A. Liquid; that is right.
22 Q. Do you know where Mrs. Trayner
23 got the bottle from?
24 A. No, I don't.
25 Q. Did you say that Susan Nelles
did not feed the baby at all in your presence that



F14 1
2 night or you simply can't recall?

3 A. I just don't recall.

4 Q. Okay. I believe you indicated
5 yesterday to Miss Cronk that the feeding that Mrs.
6 Trayner said this child could have been at the 2:30
7 break but you just didn't think -- you weren't sure
8 but you didn't think so?

9 A. I always thought it was
10 around midnight.

11 Q. Could I ask you to turn to
12 the food chart, please.

13 MR. OLAH: Just to be fair, the
14 witness' evidence that it was about 15 to 30
15 minutes after she returned from her coffee break but
16 she wasn't sure is to be found at page 5370 of
17 yesterday's testimony.

18 THE COMMISSIONER: Thank you.

19 MS. FORSTER: Q. Could you turn to
20 page 19 of that chart, please.

21 A. I have it.

22 Q. Okay. You see Miss Nelles'
23 note on the bottom of the page and the remark
24 "nutrition"?

25 A. Yes, I do.

Q. And there are two feeds,



F15

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at 8:30 and again at 2:30.

3

A. That's right.

4

Q. And, again, on page 29,

5

Miss Nelles' note of March 22nd: "Baby settled well after 2:30 feeding".

6

A. Yes, I do.

7

8

Q. If you didn't see Miss Nelles feeding the child, can you think of any reason why she would put down the feeding was at 2:30, if, in fact, it was around midnight?

10

11

A. No, I can't see her putting a different time.

12

13

Q. Now, after you came back from your first break, I think you indicated that you fed your children and did their vital signs?

14

15

A. That is right.

16

17

Q. And did you stay in the room until your next break?

18

A. I can't say for sure.

19

20

Q. Other than occasional popping in and out for short periods of time, would you have been in the room?

21

22

A. I can't say how long I was in the room.

23

24

25

Q. During this period of time



F16

1
2 was the TV on in the room?

3 What time period are we
4 talking about?

5 Q. We are talking about the
6 time period when you came back from your first break
7 and before you went for your second break.

8 I can't recall for sure. I
9 know it was on earlier but I can't recall if it was
10 on afterwards.

11 Q. Do you recall whether the
12 television was on when you saw Mrs. Trayner feeding
13 Justin?

14 A. I can't say for sure.

15 Q. You indicated in your notes
16 that you think you took your lunch break between
17 one and two in the morning.

18 A. That's right.

19 Q. Do you have any specific
20 recollection of taking your lunch break or are you
21 relying on your notes?

22 A. I am relying on my notes. I
23 don't recall what time.

24 Q. I take it, after so many years,
25 your recollection of that evening is a bit hazy?

A. That is right.



F17

1
2 Q. And in particular, your
3 estimates of the time may be off a bit one way or
4 the other?

5 MR. OLAH: Excuse me. Again, the
6 evidence yesterday was, the witness' recollection
7 initially, before she was refreshed, it was before
8 midnight. Then Miss Cronk put to her the note that
9 is in the margin of the notes made by the witness,
10 Exhibit 379, and then she was asked whether it is
11 possible that it occurred an hour later than she
12 suggested and is that correct, so all she said was
13 that it is possible it was an hour later than her
14 initial recollection. But her initial recollection
15 was around midnight.

16 MS. CRONK: Actually, it would be
17 on that too, if we are going to get into it, because
18 I put it to her, whether it was possible she had
19 taken her break between 1:30 and 2:30, such that she
20 would not have been in Justin Cook's room at the
21 time when Bertha Bell was there watching TV. She
22 said that could have happened. Her notes, in fact,
23 don't say between one and two; they say somewhere
24 between one and two. She told me she didn't know
25 when she had the break.

26 MS. FORSTER: That is all I am trying
27 to confirm, sir.



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BM/PS

MS. FORSTER: That's all I'm trying
to confirm, sir. All I am getting at, Ms. Brownless --

THE COMMISSIONER: You've got all
the evidence from Mr. Olah and Ms. Cronk, do you
really need to bother the witness?

MS. FORSTER: I'd like to.

Q. I take it it would be dangerous
for us to pin you down to the exact time, that you
can only give us a guesstimate of when you took
your breaks and when you saw various things that
evening.

A. That's right.

Q. All right. Now, we know you
took a lunch break some time around 1 to 2.

A. I'm not sure what time it was.

Q. Do you recall who was looking
after Justin Cook at the time you left for your lunch
break?

A. I can't say for sure.

Q. Do you recall who was looking
after Justin Cook when you came back from your lunch
break?

A. I can't say for sure.

Q. After you came back from your
break I believe you indicated that you stayed in



the room until your next break at roughly 3:30.

A. That's right.

Q. And between the time of those two breaks, say roughly 2:00 to 3:30, do you recall who was looking after Justin Cook?

A. I can't say. I wasn't in the room at all times, I was in and out. I can't say who was looking after him.

Q. All right. When you say you were in and out, would you have been out for any significant period of time?

A. No.

Q. How long would you have left at any one time?

A. I can't say any more than 15 minutes.

Q. 15?

A. At the longest.

Q. If all your children were in 418, what would you be leaving for, other than your breaks?

A. For formula, blankets, diapers.

Q. I'm sorry, formulas and what?

A. Blankets, diapers, any supplies that I would need for the room.



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Q. And all of those supplies are kept on the ward?

A. That's correct.

Q. So it is just a matter of going down the hall, grabbing what you need and coming back.

A. That's right.

Q. And that wouldn't take very long.

A. No.

Q. It probably wouldn't take 15 minutes, would it?

A. Not unless I stopped to do something else.

Q. And during this time do you recall seeing Mrs. Trayner relieving Ms. Nelles?

A. What time period was that?

Q. We are talking about after you came back from your dinner break until your next break at 3:30.

A. I don't recall.

Q. Do you recall if the television was on in that room during that period of time?

A. I can't say for sure, I didn't think it was.

Q. Okay.



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MR. OLAH: I might be able to assist my friend in that regard. If she looks at page 2 of Exhibit 379 there is a question mark at 2400 hours besides "On TV." I don't know if she puts that to the witness it may assist her in that regard.

MS. FORSTER: Well, we have her evidence of Gone With The Wind on around midnight, I am talking about the two to three, 3:30 period, but feel free to look at your notes if you would like.

A. No, I don't.

Q. Do you have any recollection of the television being on?

A. No, I don't.

Q. You have no specific recollection of Mrs. Trayner relieving Susan Nelles at any time during that period?

A. The only time I can recall was around midnight.

Q. Okay. And you took your next break at around 3:30?

A. That's right.

Q. And you indicated that while you were at the nursing station on this break you heard Ms. Nelles call out for Mrs. Trayner.

A. That's right.



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2

MR. OLAH: Excuse me, I hate to intrude
but the evidence was 3 or 3:30.

4

MS. FORSTER: I said around 3:30, Mr.

5

6

MR. OLAH: I'm not trying to be diffi-
cult, but there are some critical times here and
the witness' evidence was 3 or 3:30.

8

9

MS. FORSTER: Q. During the evening
of this shift, did you at any time see Mrs. Trayner
administer any medications to Justin Cook?

10

11

A. No, I did not.

12

13

Q. And other than seeing Mrs.
Trayner feed this child some clear liquid, did you at
any other time see her administer anything to this

14

15

A. No.

16

17

Q. And you indicated that after
the child died Dr. Jedeikin asked you to go and get
some 20 cc. syringes.

18

19

A. I wasn't sure what size they
were but when I referred to my notes I have written
down 20 cc.

20

21

22

Q. Do you recall how many syringes
you got?

23

24

25

A. More than one, but I can't recall



6 1
2 how many.

3 Q. All right. And a 20 cc. syringe
4 I take it is a fairly large syringe?

5 A. Fairly, yes.

6 Q. Is it larger than you would
7 normally use for a young baby?

8 A. For blood samples?

9 Q. Yes.

10 A. Yes.

11 Q. Is it a syringe you would
12 normally use for medications on that ward?

13 A. No.

14 Q. What was your reaction when he
15 asked you to get syringes of that size?

16 A. I don't recall what my reaction
17 was, I just went and got them.

18 Q. Did you see him take samples of
19 blood from the baby with those syringes?

20 A. I saw him take samples, I don't
21 know if he used the exact syringes I gave him.

22 Q. Did you see him use large
23 syringes?

24 A. Yes.

25 Q. And what was your reaction to
that?



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A. I don't recall.

3

Q. Did you regard it as unusual?

4

A. Yes, I did.

5

Q. Were you a little shocked by it?

6

A. I can't say if I was shocked, I just thought it was unusual.

7

Q. Had you ever seen that being done

8

before?

9

A. No, I hadn't.

10

Q. Now, you told Ms. Cronk this

11

morning that when you spoke to Mrs. Trayner after

12

~~some~~ ~~Waller's~~ arrest that Mrs. Trayner was very upset

13

by the whole thing; do you recall that evidence?

14

A. That's right.

15

Q. Can you tell me what your reaction

16

was when you found out that Ms. Nelles was charged with murdering babies on the ward?

17

A. At the time she was only charged

18

with one.

19

Q. Right.

20

A. I was shocked and upset.

21

Q. And subsequently you became

22

aware that she was charged with the murder of three more babies?

23

A. That's right.

24

25



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Q. What was your reaction to that?

3

A. I was also upset.

4

Q. Did you follow the Nelles case
in the press fairly closely?

5

A. No, I didn't.

6

You didn't read about it in the
newspapers?

7

8

A. Not very often, no.

9

Q. Do you normally read newspapers?

10

A. No, I don't.

11

Q. Okay. I suggest to you though
that you found it a little hard to believe that one
of your co-workers was charged with murder.

13

A. Yes.

14

Q. And would you agree with me that
it might have been even more shocking for Mrs. Trayner
who knew Susan Nelles longer than you did and was a
friend of Susan Nelles.

17

18

A. That's correct.

19

Q. And would you also agree with
me that Mrs. Trayner as team leader on the ward must
have felt some responsibility for those babies who
were supposedly murdered?

20

21

22

A. That's fair.

23

Q. Would you agree with me it must

24

25



1
2 have been horrible for her to face the possibility
3 that someone working under her may have been murdering
4 babies. It's a pretty horrible thought, isn't it?

5 A. That's a fair assumption, yes.

6 Q. And would you agree with me
7 that as a nurse or a nursing assistant you tend to
8 grow attached to the babies who are under your care?

9 A. If they are there for a long
10 period, yes.

11 Q. And many of the babies under
12 your care are there in and out for a long period of
13 time, aren't they?

14 A. Some are, yes.

15 Q. And would you agree with me
16 that their deaths are not an easy thing for you to
17 cope with even under the best of circumstances?

18 A. That's right.

19 Q. And it would be even worse if
20 you thought the children had been murdered?

21 A. Yes.

22 Q. Would you also agree with me
23 that you tend to feel a sense of camaraderie
24 with your co-workers at the hospital?

25 A. Yes.

Q. Especially if you were working



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H/DM/LN

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---Upon resuming

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THE COMMISSIONER: Yes, Mr. Hunt.

4

MR. HUNT: Yes, thank you Mr.

5

Commissioner.

6

Q. Miss Brownless, my name is

7

Hunt and I represent the Attorney General, Crown
Attorneys and the Coroner's office. I would like

8

to deal with the evidence you have given in respect
to your conversation with Mary Joan Rankin.

9

10

Miss Cronk referred to a signed

11

statement by Mary Joan Rankin which was given to

12

the Police, which set out her account of the

13

conversation that she had with you back in the

14

fall of 1980, sometime after you commenced working

15

at the Hospital for Sick Children. Just so that
we have the relevant portion clearly before us,

16

it is Miss Rankin's account of that conversation,

17

according to the signed statement, and the conversation

18

covered a number of topics, but I am only dealing

19

with the portion as it related to your work at the

20

Hospital for Sick Children.

21

The relevant portion of that part
of the conversation, according to Miss Rankin is:

22

"That she ..."

23

that is you:

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H2

"That she was particularly impressed with the skill of one nurse who she didn't name because this nurse seemed to have a sixth sense about the sick babies and seemed to be able to tell when they were going to go sour ..."

And then an explanation:

"... a sour is a term you use to indicate a deteriorating condition".

Now you have disputed Miss Rankin's account so far as that particular statement is concerned

A. That's right.

Q. Now, there is no doubt whatsoever about the significance of that statement at the time it was drawn to your attention by the Police in early April of 1981.

A. I'm sorry, can you ask me that question again.

Q. I am suggesting to you that there was no question as to the significance of that statement insofar as the murder investigation in this particular set of circumstances is concerned, and that was clear to you when it was drawn to your attention in early April of 1981.



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A. That's right.

Q. You appreciate that based on that statement somebody had noticed as of the fall of 1980 that a particular nurse that wasn't named had a sixth sense about sick babies and seemed to be able to tell when they were going to go sour or start to deteriorate.

MR. OLAH: Well, sir, I don't think the witness has adopted this statement.

MR. HUNT: I am not suggesting that she has adopted the statement.

THE COMMISSIONER: All he is saying at the moment is that is a particularly important - not a particularly important, but it was important to the Police in the course of their investigation.

MR. OLAH: That answers the first question. The second question was that someone as early as the fall of 1980 had noticed that a particular nurse had a sixth sense, and that has not been Miss Brownless's evidence, nor has she adopted Miss Rankin's recollection of the conversation.

MR. HUNT: My friend is too sensitive about this Mr. Commissioner. Really, what I am doing right now is making sure that we



H4

1
2 understand the significance of this statement in
3 that someone reported that as early as the fall -
4 that a nurse had observed that there was a
5 particular nurse with the sixth sense who was
6 able, seemed to be able to tell when the babies
7 were going to deteriorate.

8 Q. Now, there is no question
9 in your mind I suggest that that particular statement,
10 if it had been made, and I appreciate that you
11 dispute that you made it, is a very very significant
12 statement for someone to have made in the fall of
13 1980 when murder charges are laid in the spring of
14 1981 in relation to the very place, the very ward
15 where this statement is alleged to had been
16 connected.

17 A. I really just don't know
18 how to comment on what you are asking me.

19 MR. OLAH: May I suggest that
20 is really more of an argumentative question and
21 maybe it should be reserved for argument rather
22 than - if my friend thinks it a rhetorical question
23 as a submission I am content with that being done.
24 But as a matter of form of the question really
25 doesn't assist you, sir, in my respectful submission.

THE COMMISSIONER: Well, no, but I



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think I know where he is going. I am sorry, I don't want to make you transparent, Mr. Hunt.

MR. HUNT: I am in any event
Mr. Commissioner.

THE COMMISSIONER: I think I know where you are going and for that purpose I am going to allow the question. You may not get an answer.

MR. HUNT: No.

THE COMMISSIONER: But you can try.

Q. Let me put it to you this way. There is no doubt in your mind that someone having attributed that statement to you in the context of the events of the nine month period and the murder charges in April put you right in the center of things, did it not?

MR. OLAH: Excuse me, I'm not sure that is a fair question. If my friend wants to be more specific about the importance of the question and the purported answer, then that is fair. But to say that my client is now in the center of things.

THE COMMISSIONER: No, no. If somebody said that about it, it would put her in the center of things certainly as a witness at least, that is all he was saying.



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MR. OLAH: If he wants to qualify it
as a witness I have no objection to that, but to
suggest it puts my client in the center of things,
with the greatest of respect --

MR. HUNT: I'm sorry, I wasn't
suggesting that Miss Brownless had anything to do
with these baby deaths, and I would like that to
be left alone.

MR. OLAH: Mr. Hunt was just giving
me notice, Mr. Commissioner.

Miss Brownless, I am
suggesting to you that it is quite clear that someone
having attributed this statement to you in the
context of all of these events in the nine month
period, from July of 1980, to March of 1981,
culminating in charges of murder, first degree
murder against Miss Nelles, puts you, as a witness
in the center of things.

A. As much as I can recall what
the conversation was about back --

Q. I beg your pardon?

A. As much as I can recall the
conversation back in November or October --

MR. OLAH: Let her finish please.

THE COMMISSIONER: She is not



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answering the question, but that doesn't matter.
I don't think you are ever going to get an answer
to the question. I would suggest that you just go

MR. HUNT: All right.

THE COMMISSIONER: I think you have
made your point. I think so.

MR. HUNT: All right.

Q. Let's then take a look at the
account Miss Rankin has given of the conversation
to see what you agree with, and what you disagree
with with respect to it. All right. I take it
you do remember the conversation?

A. Yes I do.

Q. You don't disagree that she
had a conversation with you sometime in the fall
of 1980, and it was in her apartment I believe
in the building where you also had an apartment?

A. That's right.

Q. And I am only going to deal
with the portions of her account that relate to
your work at the Hospital for Sick Children. If
she says:

"During the course of our conversation
the subject of Janet's job at Sick



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2

"childrens came up"

3

you wouldn't disagree with that?

4

A. No, I wouldn't.

5

Q. And if she said:

6

"I asked her how the new job was

7

going and how she was enjoying it".

8

you wouldn't disagree with that answer?

9

A. No, I wouldn't.

10

Q. And if she says:

11

"She told me as you told her that

12

she was really enjoying it."

Would you disagree with that?

13

A. No, I wouldn't.

14

If she says that you said:

15

"The work was so different from the

16

work that she was used to referring

17

to Centenary and that she was learning

a lot".

18

You wouldn't disagree with that?

19

A. That's right.

20

Q. If she says:

21

"She told me briefly about the types

22

of patients she cared for and what

her responsibilities were".

23

You wouldn't disagree with that?

24

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A. That's right.

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Q. If she says:

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"... was very impressed with the amount of responsibility she was given and how knowledgeable and skilled the staff were".

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You wouldn't disagree with that.

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A. That's right.

9

Well, if she says:

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'She says she was particularly

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impressed with the skill of one

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nurse who she didn't name because

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the nurse seemed to have a sixth

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sense about sick babies and seems to

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be able to tell when they are going to go sour".

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And indicating:

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"Sour is a term we use to indicate the condition".

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You do disagree with that?

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A. That's right.

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Q. If she says that you said:

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"Sometimes this nurse would even

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have the drugs ready that are used

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in cardiac arrest in anticipation

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of an arrest."

I take it you disagree with that?

A. That's right.

Q. Now, if she says that you were enthusiastic, excited, and happy about your new job, you wouldn't disagree with that?

A. That's right.

Q. And if she says that is why she remembers this part of the conversation about your work so vividly, because of your reaction, your enthusiasm, excitement and happiness about your new job, you wouldn't dispute that that happened, you felt that way about your job?

A. Yes, I did.

Q. And you conveyed that to her?

A. Yes.

Q. Now, are you aware that Miss Rankin when she read about the arrest of Susan Nelles in the paper and read about the fact that Susan was connected with wards 4A and 4B, she on her own remembered the conversation that she had with you?

A. Does she remember on her own?

Q. On her own, were you aware that she came back to it on her own when she read



about it.

A. I don't think, I don't know if she remembered that I worked there or not, because one of the girls I used to work with ~~was~~ one of the fellows that interviewed ~~me~~ that morning.

Are you aware -

MR. OLAH: Mr. Commissioner, I am a little lost. One of the Police Officers who interviewed my client, his wife apparently worked at the Centenary, and my client is suggesting that is how Miss Rankin may have found out that Janet Brownless was connected.

THE COMMISSIONER: I see, all right.

MR. HUNT: I'm sorry.



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MR. LABOW: I'm sorry, Mr. Commissioner,
but I don't know how this kind of statement fits
into your ruling, but it is now a statement that has
been brought up by Ms. Cronk and Mr. Hunt and I know
it is not the witness' statement.

THE COMMISSIONER: I think it is all
in the record now. I am quite satisfied that I have
got it all, but maybe I haven't. Are you holding
something back?

MR. HUNT: There are parts that don't
really deal with this incident.

THE COMMISSIONER: If this wouldn't
ever be evidence - it doesn't come under that ruling
I made a long time ago about Carol Brown, because
this is not this witness.

MR. LABOW: There is no doubt about
that.

THE COMMISSIONER: I think if you will
just be patient you will probably get the whole
statement before much longer.

MR. LABOW: That is the way it looks
so far, but I would like to formally request that
other counsel be given an opportunity to see the
statement.

THE COMMISSIONER: I will reserve on



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that.

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MR. LABOW: Thank you.

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A. Am I aware?

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O. Yes.

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A. I don't recall saying one particular

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nurse to her, so I can't say.

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Q. I don't think she suggests that you said a name, but she suggests quite clearly that you mentioned one particular nurse without naming her.

16

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A. I don't recall saying one particular nurse.

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Q. Just so that we can summarize your evidence with respect to this, and I won't read it to you, but I will give the pages for my friend in case there is any dispute.

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As I understand it, you indicate that you -- it is your recollection that you told her that you were impressed with one particular team and with



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their clinical expertise and that the team you were referring to was Susan Welles and Phyllis Trayner, but you didn't mention them by name.

A. That is right.

Q. That is at pages 6139 to 6140.

You do not recall using the words 'sixth sense' --

A. That is right.

Q. -- in any context. That is at page 6142.

Your position is you did not tell her that any nurse or team seemed to be able to tell when sick babies were going to deteriorate or go sour.

A. I didn't tell her.

Q. Your recollection is you didn't tell her that?

A. That is right.

Q. That is at 6146 and you don't think that you were referring to a particular nurse when you said that sometimes the drugs would even be ready in anticipation of a cardiac arrest?

A. That is right.

Q. That is at 6147.

Now, in the summary that I gave you,



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taken from those pages, you said you don't recall using

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"~~words~~, "sixth sense". Does that mean that maybe

4

you used them

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A. I don't think I did at all.

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So you don't think you did, but

7

you are not

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A. No, I don't think I did use the
words, "sixth sense".

9

You don't think you did, so you

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are not sure?

11

Well, yes.

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So you might have used the words,

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"sixth sense" in some context. I am not trying to be

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tricky, but you are so definite about some of the things

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you remembered you did or didn't say and then you

16

didn't recall about sixth sense. If your position is

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that you just didn't use them, then feel free to give

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that. If you are in some doubt as to whether you
used them or not I would like to know.

19

A. I don't think I know that I did

20

not use sixth sense. I don't think I have ever used
that term before.

21

Q. You don't think you ever. All

22

right.

23

And looking at Joan Rankin's account of

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2 the conversation and yours it is quite clear that the
3 portion of her account of the conversation, insofar as
4 related to the Sick Children's Hospital is concerned,
5 is you disagree with a critical portion of that
6 in terms of the observation she attributes to you,
7 that a particular nurse had a sixth sense and could
8 seem to be able to predict when the babies were going
to deteriorate.

9 A. That is right.

10 Q. That is the critical -- in terms
11 of putting you in the center of things, as a witness,
12 I am suggesting to you that that is the critical part
of the account of Joan Rankin.

13 A. That is right.

14 Q. And the two really can't stand
15 together, can they? Your account that really you were
16 just talking about a team that you were impressed
17 with and you didn't use the words sixth sense can't
18 stand together with her account of the conversation.
19 What I am saying to you is we have two very different
accounts of what was said.

20 A. That is right.

21 Q. Now, at some point you were shown
22 the statement of Joan Rankin, were you not?

23 A. Yes, I was.
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Q. You were asked to comment on it?

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A. Yes.

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A. All right. But before that happened, am I correct that two police officers approached you and asked you about the conversation that you had with Joan Rankin? This is before they showed you any statement.

8

9

A. Did they come and talk to me before they showed me?

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Q. Yes, did they come on occasion prior to the time they showed you the statement and asked you about a conversation that you had had with Joan Rankin?

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A. I can't say for sure; I think so.

15

16

Q. Pardon?

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A. I can't say for sure, but I think so.

18

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Q. You think so. At that time do you recall whether or not you told them you couldn't remember the conversation at all?

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A. I can't recall what I said to them.

22

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Q. Do you think you might have told them that you couldn't remember the conversation at all?

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2 Q. I can't say what I said.

3 Q. In any event, you do recall that
4 they came back then and they showed you the written,
5 signed statement of Joan Rankin.

6 A. Yes.

7 Q. That was how long after the first
8 time you spoke to them about that?

9 A. I can't say for sure.

10 Q. A few days or a week?

11 A. I can't say.

12 Q. Did you have any conversation
13 with Joan Rankin in the interim?

14 A. I remember her calling me once,
15 but I don't remember what the conversation was totally
16 about. She said that she was going to talk to the
17 police. That is all I can recall.

18 Q. All right. Did you know that when
19 the police first visited Joan Rankin on the 8th of
20 April, 1981, and she gave them an account of her
21 conversation and she was invited to make a formal
22 statement she indicated to them that she would like
23 to speak to Janet Brownless first and then she would
24 call them back the next day. Did you know that?

25 A. Yes, I did.

Q. Did she tell you that when she



3
2 phoned

3 A. I don't recall exactly what
4 she said when she phoned, but she said they want to
5 talk to me first before she talked to the police.

6 Q. All right, so you recall that much
7 of the conversation?

8 A. Yes.

9 Q. And then did she tell you in
10 her conversation that the police had been to speak to
11 her about the two of you having had a discussion in the
12 fall of 1980?

13 A. I can't say for sure, but I
14 think so.

15 Q. Did she tell you what her recollec-
16 tion of the conversation was that she had with you?

17 A. I don't think she did, no.

18 Q. Did you tell her what your
19 recollection of the conversation was?

20 A. I don't think I did, no.

21 Q. Well, did you have a discussion
22 about the conversation?

23 A. I don't think we did, no.

24 Q. Well, can you assist us then after
25 she told you that she had been visited by the police
and they wanted to speak to her about this conversation



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she had with you, what did you talk about?

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A. I told her that she could do what she would like to do, what she feels is best. I hadn't spoke to Mary Jo Rankin beforehand or since we came back from our trip, so our conversation was short. We had nothing social to talk about.

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Q. So if we can piece it together now from your recollection she advised you that she had been visited by the police and that they were interested in the conversation you had had with her in the fall, that she was going to speak to them about that and give a statement about it.

13

Uh-huh.

14

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Q. And you told her to go ahead and do what she wanted to?

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A. What she felt was best.

Q. What she felt was best and you didn't ask her what it was that she was going to say?

A. I don't think I did, no.

Q. And you didn't ask her what her recollection of the conversation was?

A. I don't think I did, no.

Q. Nor did you put to her your own recollection of the conversation, as you have given it subsequent to that time?



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A. No, I don't think I did.

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Q Did you tell her that the whole business of this charge against Susan Nelles and the upset on the ward was very upsetting to you?

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A. I don't know what I said to her. I don't think I did.

7

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Q Did you tell her at all that you just didn't want to get involved in this thing, as

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10

I don't think I said that.

11

You are aware that --

12

MR. OLAH: Excuse me, I presume my friend is going to call Ms. Rankin if he is alleging such statements were made.

14

MR. HUNT: I asked the witness that.

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MR. OLAH: There is a suggestion and I assume there is some basis for that suggestion.

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MR. HUNT: I asked the witness the question. Mr. Commissioner, if I can't ask questions of a witness without upsetting my friend in terms of what may be behind it.

20

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THE COMMISSIONER: There is no reason, Mr. Olah, he can't ask, "Did you say that".

22

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The only thing that is improper is if he has no basis for it at all and he tries it out, but he has a basis,

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11 1
2 he has a statement.

3 MR. OLAH: Well, no, my friend is sug-
4 gesting a statement, is asking about the fact or a
5 suggestion that this witness didn't want to come
6 forward or didn't want to be a witness. That is not
7 in the statement at all. If there is some foundation
8 for that suggestion, I would like to know about it.

9 THE COMMISSIONER: You can ask. This
10 is cross-examination and surely you can ask whether
11 the witness —

12 MR. OLAH: I am aware of the ruling of
13 the Court of Appeal. I think it is Ben Cardino and
14 De Carlo in which it has been held that you don't have
15 to have any foundation for suggestions to a witness,
16 but with the greatest of respect, given the ambit of
17 this hearing surely there must be foundation. All I
18 am asking my friend to say is if there is some founda-
19 tion I would like to know it and I would like to know
20 if he is going to call that evidence.

21 MR. HUNT: This wasn't a suggestion,
22 Mr. Commissioner. This was a simple question. I
23 don't understand my friend's concern and his apparent
24 sensitivity to it.

25 MR. OLAH: Well, I am sensitive to any
suggestion coming from my friend which seems to imply



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that --

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THE COMMISSIONER: There is too long

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a pause there

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MR. OLAH: Anyway, I don't like the suggestion and I simply want to know --

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THE COMMISSIONER: You are making

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these abusive statements about him, if you make them here they are perfectly all right.

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MR. HUNT: But in any event I have a

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very thick skin, Mr. Commissioner.

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MR. BROWN: I support Mr. Olah, because

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I think if Mr. Hunt is going to suggest by his questions that he has some evidence that Ms. Brownless

13

on a certain occasion said this to another person

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it is incumbent upon him to call that evidence.

15

Ben Cardino I think says something to the effect

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it may not legally be improper to ask a question without

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a foundation, but it is quite a different

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question as to the propriety of that certain question.

19

THE COMMISSIONER: All right. I think

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there is quite adequate foundation for this question.

21

I am going to allow it and I am sure we are all going

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to be sorry about the amount of time we have spent

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on this when the answer comes out; that is all.

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MR. OLAH: I know, sir, but the concern

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I have is about the manner in which sometimes as we are
conducting this hearing is that evidence is being given
by counsel in terms of questions and some of that
evidence or implications are unfavourable and unfair
to the witness. There is no foundation for it and
then reported subsequently in the paper and in head-
lines and it is most unfair and most improper, in
my respectful submission.



BmB.jc

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THE COMMISSIONER: All right. Well,
in this instance I think there is enough foundation
and would you carry on, Mr. Hunt.

MR. HUNT: Thank you, Mr. Commissioner.

Q I think we had the answer
from the witness to the question, so, I won't dare
ask it again.

Now then, I think I was saying to
you, were you aware that after telling the police
she would like to speak to you and she would call
them back the next day that in fact the police did
again get in contact with Joan Rankin the next day
and gave the statement that we have been referring
to signed by her and dated April 9th?

A. Yes.

Q So, you are aware that came
after your phone conversation with her?

A. Yes.

Q Now then, the police I think
you have indicated returned and showed you the
statement?

A. That's right.

Q Did you have the opportunity to
read the statement?

A. Yes.



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Q And I am suggesting to you that when you read the statement the critical part of it that we have looked at here in some detail dealing with the sixth sense about babies deteriorating, the significance of that was quite apparent to you?

A That's right.

Q I believe you saw it on the 14th of April of 1981 for the first time. Does that accord with your recollection?

A Yes.

Q So, it would be some two and a half or three weeks after the arrest of Susan Nelles?

A That's right.

Q There was no doubt in your mind at that time when you saw this statement that that remark attributed to you put you right in the centre of the police investigation in terms of being a witness?

A After we discussed Mary Jo's statement I didn't feel it did, no, because I thought I had cleared it up.

Q No. Well, after you had given the answer that you have given here today you didn't feel you were in the centre of the investigation in terms of being a witness is concerned?

A That's right.



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Q. No, I appreciate that. But what I'm saying to you when you read the statement and you saw that particular remark attributed to you, there was absolutely no doubt in your mind about the significance of that in terms of yourself?

A. Yes.

Q. It put you right in the centre of the investigation at that point in time as a witness?

A. Yes, I guess it would.

Q. All right. And what the police wanted was the name

A. But I didn't agree that I said one person.

Q. When the police came to you they wanted the name, isn't that right?

A. I don't recall what questions they asked me.

Q. Well, they came to you with the statement in which a remark is attributed to you that you were impressed with one nurse and the statement says who she didn't name because the nurse had a sixth sense about the sick babies and seemed to be able to tell when they were going to deteriorate. I am putting to you that when the police came with the statement and gave it to you to read, the thing



J.4

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they were interested in from you was the name?

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A. I don't recall them asking me

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that question

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Q. Well, it would be shocking,

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wouldn't you agree with me, if they hadn't pursued

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that to try and find out who the name of the nurse

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that commented on it was?

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A. I think I referred to them as

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one team.

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Q. Well, in any event, when you

read that and you saw that remark attributed to you,

12

you were shocked?

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A. When I read Mary Jo's ...

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Q. Yes.

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A. Yes, I was shocked.

16

Q. And you didn't like being in

the centre of this investigation?

17

A. I don't think I really thought

myself in the centre.

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Q. Well, I thought we just agreed

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on it. ~

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MR. OLAH: Would you let her finish,

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please.

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MR. HUNT: I am sorry.

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THE WITNESS: I thought after I

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J.5

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cleared it up with them how I remember the
conversation as being one team.

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Q I appreciate that you explained
the remark to the police on that occasion. You
weren't talking about one nurse in particular but the
whole team and then it was part of their job to know
when the patient's condition is deteriorating?

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A That's right.

Q That's what you said to them
that you said to Mary Jo Rankin?

A That's right.

Q And you felt after you had said
that to them that you were now no longer in the centre
of the investigation as such?

A I helped them as much as I
thought I could.

Q I see. Well, would I be right
if I suggested to you the last thing you wanted on
April 14th of 1981 was to be in the centre of this
police investigation even as a witness?

A I just wanted to help them as
much as I could.

Q I see. So, you had no real
concern about being in the centre as a witness?

A I never really thought about it.



J.6

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Q Well, I thought you told me not too long ago that the significance of that statement was apparent to you when you read it, that it put you right in the centre of this investigation?

A I'm sorry, I must have misunderstood you.

Q I see. So, you read it and it didn't cross your mind that this now puts you as a person who back in the fall apparently had a very relevant observation about a nurse?

A That's right.

Q It didn't strike you that way?

A No, it didn't.

Q How long after the whole incident with the police did it come to you that the remark attributed to you by Mary Joan Rankin had in fact put you into the centre?

MR. OLAH: First of all, before my friend gets to that question he's got to establish any foundation for that question and I suspect that there is no such foundation, but maybe he would like to try.

MR. HUNT: I don't even understand my friend's objection.

MR. OLAH: Well, the objection is,



J.7

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2 how long afterwards it came to you that you became
3 centred?

4 THE COMMISSIONER: You mean did it
5 ever come to you?

6 MR. OLAH: And the first question is
7 did it ever.

8 MR. HUNT: Well, the witness has
9 already told me she appreciated the significance of
10 the statement in terms of where it put her.

11 MR. OLAH: No, she then said I'm
12 sorry, I have misunderstood you.

13 MR. HUNT: She misunderstood the
14 timing of it, the point in time when she read the
15 statement. I'm saying when did it strike you that
16 the remark had put you in the centre of things?

17 MR. OLAH: I still object, sir, I
18 still think he has to establish it the right way.

19 THE COMMISSIONER: Well, he doesn't
20 have to say if it did. This is cross-examination
21 and you are surely allowed to put that kind of question.
22 Now, it may be a bit of a trap for the witness but
23 that's what cross-examination is all about.

24 MR. HUNT: It wasn't intended but it
25 is no longer ...

THE COMMISSIONER: We have been doing



J.8

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it for hundreds of years.

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MR. OLAH: I have no concern that there is anything to be trapped here, but advocacy rules still apply to my friend.

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THE COMMISSIONER: No, advocacy rules recommend leading witnesses into traps. I hate to have to break this to you after all these years but that's what we've all been doing.

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MR. OLAH: I have no concern that there is anything to be trapped here but I am just suggesting that my friend should do it properly.

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THE COMMISSIONER: All right.

MR. BROWN: The one concern I have, sir, before Mr. Hunt gets going again, we are really beginning to go into Phase II.

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THE COMMISSIONER: Yes, I will concede there is a spot of Phase II about this.

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MR. HUNT: No speculation though, sir.

MR. BROWN: Mr. Hunt is certainly entitled to cross-examine on credibility. He is now drawing into question the significance of the statement. I mean, perhaps Mr. Hunt can advise us whether the Crown thought it so significant that they cross-examined on it at the preliminary inquiry. I don't recall any of that.



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MR. HUNT: Well, of course the Crown would hardly be able to cross-examine this witness on another witness' statement at a preliminary inquiry is quite a different situation.

MR. BROWN: I don't think they called Miss Rankin either.

THE COMMISSIONER: All right. Now, Mr. Shinehoft, you want to join in this party I see.

MR. SHINEHOFT: Well, we are still looking for the statement.

THE COMMISSIONER: Yes.

MR. SHINEHOFT: We would like again - you know, I would submit, with the greatest of respect, Mr. Commissioner, that enough has been said about this statement that surely --

THE COMMISSIONER: Well, if it were a statement that she made herself I would certainly think that more than enough has been said about it but it is a statement made by someone else and that someone else is not represented here at the hearing and I have great reservations about producing it.

MR. SHINEHOFT: Well, again I am formally asking for a copy of this statement, sir.

THE COMMISSIONER: Yes. Yes, all right. Well, I have reserved on it when Mr. Labow asked, so,



J.10

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2 I will continue to reserve on it.

3 Now, I haven't the faintest idea
4

5 MR. HUNT: My friends have beaten
6 me into submission and I am anxious to move on to
7

8 Q The next area I would like to
9 deal with is the area of your two visits to Mrs.
10 Trayner's house that you testified to this morning,
11 one on March 25th and one on March 27th, both of 1981.

12 With respect to the Wednesday, the
13 March 25th visit, as I understand your evidence, you
14 were called back by Mrs. Trayner after the police
15 had finished interviewing her?

16 A She asked me to go to her house,
17 yes.

18 Q And she asked you to come over
19 to her house. What time did you arrive there,
20 approximately?

21 A I can't say for sure, around
22 3 or 3:30 or after.

23 Q And at the time she was upset?

24 A Yes.

25 Q And she advised you that the
police either had or were going to arrest Susan Nelles?



J.11

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A. I think she worded it that they
had arrested Susan.

Q. They had arrested her?

A. Yes.

Q. All right. And in due course
during the time you were there the news came on, what,
the television or the radio?

A. The television.

Q. And there was some account of
the fact of the arrest?

A. That's right.

Q. And it was during this period
where she made the statement, and correct me if I
have it wrong, but I thought you said Mrs. Trayner's
comments on the fact of the arrest of Susan Nelles
was 'Why her, why not me, I was there just as much
as she was.'?

A. That's right.

Q. And you, in the context in
which the remark was made and watching her make it,
and listening to her, your reaction to this was, it
was said like a mother who is grieving over a child
that's dying?

A. That's right.

Q. And you had seen that occur
before?



J.12

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2

A. That's right.

3

Q. A mother grieving over a child

4

that has died?

5

A. Yes.

6

Q. And the mother I take it from

7

what you are describing has said something like 'Why

8

her, why not me.', indicating she would have preferred
herself to die as opposed to the child?

9

A. That's right.

10

Q. And in the circumstances where

11

you have seen that said by mothers grieving over lost

12

children, I take it they were emotional?

13

A. Yes.

14

Q. And the mothers really meant

what they said, they were in deep grief?

15

A. That's right.

16

Q. And that's the reaction you took

17

from what Phyllis Trayner said when she saw the

18

account on the news?

19

A. Yes.

20

Q. Why her, why not me, I was there

just as much as she was.

21

A. That's right.

22

Q. And really then what you are

23

telling us she was saying, the context you took it in

24

25



J.13

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was why didn't they charge me, why her?

3

A. Yes.

4

Q. Now, in the circumstances where you have seen mothers say something like that, it is in a case where a child, a loved one has died?

5

6

A. Yes.

7

8

Q. And there is certainly no suggestion, up until this point, that there was any relationship between Phyllis Trayner and Susan Nelles that would rank up with a mother and child relationship? You are not aware of any deep relationship like that between them, are you?

9

10

11

12

A. No.

13

14

Q. And I suggest to you that the remark by Phyllis Trayner in effect saying why didn't she get charged as opposed to Susan Nelles in a grieving way, as if she would have preferred that to what happened was most bizarre?

15

16

17

18

A. I just took it along the context of someone being upset, that she was arrested and Phyllis was there just as much as Sue.

19

20

21

Q. Well, you have told us what context you took it in and that was in the way a mother grieves for a child that is dying?

22

23

A. Yes.

24

25



J.14

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You have been very clear on that.

3

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And I am saying to you that in the context of what had happened, the charge of First Degree Murder laid against Susan Nelles, a remark by Phyllis Trayner, given the relationship they had to the effect that she would have preferred to have been charged herself as opposed to Susan Nelles is most bizarre?

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A. I don't think I thought about it any further than after she made the remark.

Q. Your reaction certainly wasn't that you would have preferred to have been charged over Susan Nelles?

A. I think everybody reacts differently.

Q. Well, your reaction wasn't that, was it?

A. No.

Q. You wouldn't have preferred to have been charged with First Degree Murder as opposed to one of your colleagues?

A. No.

Q. And did you hear any other nurse react that way that they would rather have been charged with First Degree Murder than Susan Nelles?

MS. FORSTER: Mr. Commissioner, the



J.15

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2

statement didn't indicate that Mrs. Trayner wanted
to be arrested in preference to Susan Nelles?

3

4

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6

THE COMMISSIONER: No, but that was
the interpretation the witness put on it and that's
what Mr. Hunt is following up, that's all. The
statement didn't say that.

7

8

9

10

MR. HUNT: Q Did you hear any other
witness say they would have preferred to have been
charged with First Degree Murder as opposed to Susan
Nelles?

11

12

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A Not in my presence.



K
DM/cr

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Q. Now then you went back to the house on the Friday night March the 27th in the company of your mother, and again this was in response to a phone call that you had made to Phyllis Trayner?

A. No, I talked to Liz first.

Q. Oh, all right. And then did you phone Phyllis Trayner?

A. Yes, I did.

Q. That is what I meant. I appreciate you phoned Liz first. Liz Radojewski's concern was over Phyllis Trayner being alone that night because her husband was away?

A. That's right.

Q. And her being upset?

A. That's right.

Q. And you arrived at around 11 o'clock?

A. Yes.

Q. With your mother?

A. Yes.

Q. And do I take it that Phyllis Trayner was intent on the news that was on TV?

A. She was watching it, yes.



1

2

Q. Was she flipping from one
news broadcast to another?

4

A. Yes.

5

Q. And her interest was in any
news about the arrest of Susan Nelles?

6

A. Yes.

7

8

Q. And in addition to this she
had stacked around her in the room, newspapers?

9

A. Did you say around her?

10

Q. Well stacked somewhere around
her in the room, newspapers?

11

A. Yes.

12

13

Q. And these newspapers related
to the arrest of Susan Nelles?

14

15

A. I am not sure if every paper
had the information in it, but I'm sure it did.

16

17

Q. Did you notice certain of
them that did?

18

A. Some did, yes.

19

20

Q. Did you get the impression
that what was there was the news of the day insofar
as it related to the Nelles' arrest?

21

A. Yes.

22

23

Q. And I think you said your
mother suggested that Phyllis turn off the news

24

25



1
2 and throw out the papers?

3 A. That's correct.

4 Q. Really she is suggesting,
5 forget about this, this arrest of Susan Nelles?

6 A. Not forget, just that it is
7 really upsetting you so why don't you turn it off.

8 Q. Did Phyllis Trayner seemed
9 obsessed with the thing when you were there?

10 A. That was not my impression.

11 Q. But she was flipping from
12 one channel to another?

13 A. Yes.

14 Q. Getting all the news that
15 she could; and had the papers around her to the
16 point where your mother suggested she turn it off
17 and throw it out?

18 A. That's right.

19 Q. And then come with you that
20 night to spend the night with you?

21 A. Right.

22 Q. And I take it Mrs. Trayner
23 declined those suggestions?

24 A. That's right.

25 Q. And when you left that night,
was she in the same state that she was in when you



1
2 arrived?

3 A. I think we had convinced her
4 to turn it to watch a movie.

5 Q. I guess the news would end
6 at a certain point too?

7 A. That is true.

4
8 Q. There is one more area that
9 I would like to deal with, and I will be through. We
10 have heard from Mrs. Radojewski about these events
11 that went on in the Hospital in the period from
12 late August through to early October, that involved
13 threatening phone calls; marks made with lipstick
14 on lockers and other personal property; and drugs
15 in the food of Phyllis Trayner and Sui Scott. In
16 your evidence as brought out by your counsel,
17 Mr. Olah, as I understand it, when these events
18 took place you were not on duty at the precise
19 times when any of these things happened?

20 A. That's right.

21 Q. But we have heard from Liz
22 Radojewski that this series of events was something
23 that caused considerable concern and stress to
24 the teams on Ward 4A and 4B?

25 A. Yes, it did.

Q. Both with respect - a concern



Brownless, cr.ex.
(Hunt)

1
2 with respect to their own safety, and even the
3 safety of the patients?

4 A. This is you are saying what
5 Liz said?

6 Q. Yes. I am saying that is
7 what she said, and I am just asking you does that
8 accord with your recollection of that period in
time?

9 A. Yes.

10 Q. And the events while you were
11 not personally there for them, when any of them
12 may have happened, they were certainly matters of
13 discussion amongst the people on your team and on
4A/4B?

14 A. They were discussed, yes.

15 Q. I mean everybody knew that
16 these very wierd, bizarre things are happening?

17 A. That's right.

18 Q. And that is what led to the
19 concern and the stress and the fear for personal
20 safety and the safety of the patients?

21 A. Yes.

22 Q. So as the events would take
23 place I gather in the course of the next shift that
24 you would work that the conversation would turn to
25



1
2 what had happened some time prior to your being
3 there. I want you to - you are looking at me
4 suspiciously, I am not suggesting that you had
5 anything to do with these. I'm just trying to get
6 the reaction of everybody. Did you hear about it
7 when you would come into work on the next shift
8 after something had happened that was particularly
weird or threatening?

9 A. Yes, I heard about it.

10 Q. I really just want to ask you
11 about one, because it does - in a way it is
12 important to get your evidence with respect to this.
13 Did you become aware that on August the 26th of
14 1981 --

15 THE COMMISSIONER: Which exhibit is
16 this at the preliminary inquiry, it is about 86
or something?

17 MR. BROWN: 76, sir.

18 THE COMMISSIONER: It must be B, I
19 am sorry, it is 82B I think.

20 MR. HUNT: This is 32C.

21 THE COMMISSIONER: It is 32B.

22 MR. HUNT: Q. I will just give you
the account of the event that I am interested in --

23 A. What page is it on?
24
25



1

2

Q. Well it is in Exhibit 32B.

3

THE COMMISSIONER: It is Tab 76.

4

Q. Do you have that there, I'm
sorry, I thought you didn't have it.

5

A. Yes.

6

7

Q. What I want to ask you, did
you at some point become aware that on August the
26th of 1981 at approximately 1:25 in the afternoon --

8

9

A. That is 2:25, 2:20 or 2:00.

10

11

12

Q. All right. At that time in
the afternoon that Phyllis Trayner's bank manager,
that he received a phone call at the bank from a
female who stated to him:

13

"Where is your customer Trayner..."

14

And then after a pause:

15

"She will be dead in October."

16

17

18

19

And then that shortly after that
phone call Phyllis Trayner and her husband arrived
at the bank and were informed by the bank manager
of the fact that he had just received a phone call
from a female who said:

20

21

"Where is your customer Trayner. She
will be dead in October"

22

23

Did you become aware of that incident
at some point in time?

24

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A. Yes.

Q. Now, what I want to ask you about is that at the preliminary hearing certain evidence was given with respect to this incident, by Phyllis Trayner, and I am referring to Volume 5 at page 1088. It was during the cross-examination of Mrs. Trayner by Mr. Cooper, Counsel for Susan Nelles, and I will just read you the questions, I don't have an extra copy, but if it becomes important that you see them I will bring this one up. She is asked the following questions and gives the following answers:

"Q. So, to your knowledge Susan Nelles would have no idea where you did your banking from anything you knew, isn't that true?

A. I think she probably, she may have known because I was having problems getting my money from the one bank that the Hospital was putting it into and trying to get it to my branch, and that was talked about on the floor with the girls.

Q. All right. Would you have discussed where your branch was



1
2 "located?

3 A. Yes, I did.

4 Q. Who your manager was?

5 A. Not who the manager was, no.

6 Q. Not who the manager was. So that
7 any of the girls on the floor would
8 have known then where you did your
9 banking?

10 A. Yes.

11 Q. Is that right?

12 A. That's correct."

13 That was the evidence of Phyllis
14 Trayner with respect to who on the floor amongst
15 the girls would have known where she did her banking
16 and where her bank was located.

17 Now, what I want to ask you is, did
18 you know where Phyllis Trayner's bank was?

19 A. No, I didn't.

20 Q. Did you have any idea at all
21 where she banked?

22 A. No, I didn't.

23 Q. What bank she dealt with?

24 A. No, I possibly wasn't working
25 the night that conversation took place.

Q. Where the branch was?



Brownless, cr.ex.
(Hunt)

1

2

A. No.

3

Q. Didn't have any idea who the
manager was?

4

5

A. No.

6

Q. And I ask you, did you ever

7

hear the subject matter of where Phyllis Trayner
did her banking discussed amongst the girls on the
floor?

8

9

A. No.

10

MR. HUNT: Thank you. I have no

11

further questions.

12

THE COMMISSIONER: Yes, thank you.

13

Mr. Percival.

14

CROSS-EXAMINATION BY MR. PERCIVAL:

15

Q. Miss Brownless, my name is

16

Percival and I appear on behalf of the Metropolitan
Toronto Police.

17

I wonder if the Registrar, Mr.

18

Commissioner, if we could have Exhibit 379 before
the witness, and those are her handwritten notes
and I think they are from six or seven pages, do
you have those?

19

20

21

A. I did, but they were taken

22

away.

23

THE COMMISSIONER: She has a copy of

24

25



Brownless, cr.ex.
(Percival)

6582

1
2 those, has she not?

3 THE WITNESS: No, they were taken
4 away.

5 MR. PERCIVAL: The Registrar is just
6 being efficient, sir.

7 Q. Now, Miss Brownless, I want
8 to look at these and try to understand the
9 sequence. I believe the evidence you have given
10 is that at some point in time, certainly after
11 your first involvement with the police investigation
12 on March the 25th, that you drew up these documents
13 in your handwriting?

14 A. That's correct.

15 Q. And in particular I am
16 trying to understand; page 4 seems to be a brief
17 resume of what you could recall, involving the
18 events surrounding the death of Allana Miller.

19 A. That's right.

20 Q. And do I take it, or I
21 suggest to you what that appears to be is your
22 best recollection as to what you told the police
23 officers with respect to the death of Baby Allana
24 Miller so far as you could recall it when you tried
25 to recall it after the event?

A. Yes, but not necessarily in



1
2 order.

3 Q. I understand. Then I suggest
4 to you if one looks at the back of the diagram it
5 starts:

6 "Come to work at 1900 hours".
7 That that particular page represents a brief resume,
8 or a summary of what you told the police officers
9 on March 25th relating to the death of Baby Justin
Cook?

10 A. That's correct.

11 Q. And if I may deal with that.

12 Mr. Commissioner, I think it is
13 important because in order to get the significance
14 involving the brief resumes, I would like to
15 introduce and provide copies to my friends and
16 with Mr. Olah's consent, of the two statements
17 taken from this witness on March 25th and the
18 second statement which was started on March 25th
19 and continued on and was finished on April the
20 7th, 1981. Miss Cronk has provided to me the
original handwritten one, attached to which is a
typewritten one and I believe copies are available.

21 THE COMMISSIONER: All right.

22 MR.OLAH: I have no objection,
23 the typed statements, other than for maybe one
24
25



1
2 brief paragraph accurately reflect the handwritten
3 statements.

4 MR. PERCIVAL: Well, I thought I
5 would put both of them in as an exhibit.

6 THE COMMISSIONER: Put both the
7 handwritten and the typewritten one?

8 MR. PERCIVAL: Yes. Perhaps we will
9 put the first one. The first statement that was
10 taken on March 25th, 1981, I believe in your kitchen
11 at 8:30 on the morning of March 25th, 1981.

12 THE WITNESS: That's correct.
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14
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D/PS

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Q. You have seen this one before?

3

A. May I see?

4

Q. Yes, please.

5

A. Yes, I have.

6

MR. PERCIVAL: All right. May we have
the two documents, the typed and the handwritten one,
marked as the next exhibit, Mr. Commissioner.

8

THE COMMISSIONER: Yes, all right.

9

380.

10

---EXHIBIT NO. 180: Statement of Janet Elizabeth
Brownless taken at 8:30 a.m.
(Handwritten and typewritten
copies.)

11

12

13

MR. PERCIVAL: Q. Then, Ms. Brownless,
I understand on March 25th, continuing on at 12:15,
shortly after noon on the same date, they started
to question you with respect to the death of Baby
Allana Miller and the events of Friday, March 20th
and that was completed on April 7th, 1981, again in
your kitchen. Is that correct?

18

19

A. That is correct.

20

Q. And again I have the document
which is typed and a handwritten one which you have
signed.

21

22

A. That is right.

23

Q. Thank you.

24

25



May we have that marked as the next exhibit, Mr. Commissioner?

MR. COMMISSIONER: That is 381.

EXHIBIT NO. 381: Statement of Janet Elizabeth Brownless taken at 12:15 p.m. (Handwritten and typewritten copies.)

MR. PERCIVAL: Thank you.

Q. Now, do I understand, Ms. Brownless, the reason that you prepared 379 is that you did not know that you could have had a copy of your statement given to the officers?

A. That is correct.

Q. And was it also the purpose of preparing at least page 4 and the back of the diagram in Exhibit 379, being the resume of both the events surrounding the deaths of Baby Justin Cook and Allana Miller, was because someone at the hospital, the hospital lawyer had told you, or had communicated to you, the necessity of trying to write down what you had told the police officers?

A. Yes.

Q. Thank you. Carrying that one step further, do I take it that at some point in time and before the end of March and when you were up north with the benefit of your cheat sheets, as you



1
2 call them, that you started to set out in some
3 much more considerable detail what your recollection
4 was involving the long night shift of March 21st and
5 into March 22nd when Justin Cook died?

6 A. That's right.

7 Q. And it was that, with the aid
8 of those cheat sheets that you were able to formulate
9 pages 1, 2, 3 and 5.

10 A. That is right.

11 Q. Do I take it at no time up until
12 you were prepared to give evidence in these
13 proceedings were your handwritten notes ever given
14 to the police officers?

15 A. Were these ever given to the police
16 officers?

17 Q. Yes, the police officers.

18 A. No, they weren't.

19 Q. May I deal with Exhibit 379 and
20 I think you have given evidence already, as I under-
21 stand it, that you recall a certain interchange involv-
22 ing a doctor coming in and saying something and then
23 Susan saying: "Go out and find out what that was
24 all about."

25 If I look at Exhibit 379, opposite
the time of 2200 hours, the note is:



1

2

"Settled Jadina in crib."

3

That is one of the babies you were looking after;

4

is that right?

5

A. That is right.

6

Q. And you say:

7

"Went to talk to Phyllis because Sue
wanted to know what the doctor said."

8

Now, does that relate to that discussion about

9

digoxin?

10

A. I can't say for sure.

11

Q. Can you tell me what it relates

12

to then?

13

A. I can't recall what it relates

14

to.

15

Q. Thank you. 2400 hours on the

16

second page of 379 you have got:

17

"Got bottle from fridge -- feed Jadina?

18

On TV. Stayed in room with Sue
rocking Jadina. Then Phyllis relieved

19

for supper. I was in and out of room

20

few times til I started to feed

21

Jessica at 2:00. Dr. Roy (blank)

22

in around 2330-2400 to see Justin

23

Cook -- talked a bit with Sue about

24

parents and Justin's condition."

25



1
2 Now what were you talking to Sue Nelles about relating
3 to Justin Cook's parents and Justin Cook's condition?

4 A. Other than what's written here I
5 don't recall exactly what was said.

6 Q. Well, was there something said
7 by Susan Nelles to you at that time that she was
8 concerned that the parents, having come from a
9 smaller town in Ontario, had let the boy's condition
10 deteriorate and had taken too long to bring the
11 baby to the Hospital for Sick Children? Do you
remember that?

12 A. No, I don't.

13 Q. So do I take it at this
14 particular point you cannot recall what that meant?

15 A. That's right.

16 Q. Do you recall seeing Justin Cook's
17 parents that evening?

18 A. I can't say for sure if I saw
19 them at all.

20 Q. Carrying on to the bottom of
21 page 3, and this is after the Baby Justin Cook, and
22 you have got the note, the last five lines:

23 "Baby Justin had died. Sue started
24 to bath him with Bertha."

25 That is Bertha Bell, is it?



1
2 A. That's right.

3 Q. "Dr. Roy (blank) came in and
4 got Sue for paperwork. Then came
5 back in took blood from Justin, asked
6 me to get 20 cc. syringe."

7 Did you get the impression, because you have stated
8 it that way, did you get the impression that the
9 doctor came into the room and asked Ms. Nelles to
10 leave the room before he then asked you to go and get
11 some syringes because he wanted to take a blood test?

12 A. No, I had the impression that he
13 wanted Sue to finish her charting on the child, be-
14 cause the chart leaves the floor with the child.

15 Q. I understand. Do I take it these
16 were the last notes or the last notes that had to be
17 done for Justin Cook, the last nursing notes?

18 A. That's right.

19 Q. So you didn't take -- the fact
20 that he came in and specifically asked Sue to finish
21 the paper work was anything other than would
22 normally be required of her on the death of a
23 child?

24 A. That's right.

25 Q. I think you told us the taking
of blood from Justin Cook was something -- after his



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death was something you had never observed any time
by any doctor with any patient.

A. That's correct.

Q. And particularly with at least
one, if not two 20 cc. syringes.

A. I can't recall what size they were.
I know I have 20 cc.'s written here, but I can't
recall what size they use.

Q. That is your best recollection
then. Do you have any doubt about it now?

A. No, I don't.

Q. Do you remember Dr. Fowler coming
in?

A. I don't remember seeing Dr.
Fowler at all that night.

Q. Did you, after having seen Dr.
Jedeikin take the blood from that child,
go out and say, "I don't know why Dr. Jedeikin took
the blood from Justin Cook. Does anybody know why?"

A. No, I never questioned it.

Q. Quite apart from that, whether
you questioned it, did you ever go out and report
it to your confreres in the nursing team?

A. No, I was asked if I knew what
he was taking it for and I said I never asked him.



1
2 THE COMMISSIONER: I'm sorry. You were
3 asked at the time --

4 THE WITNESS: After he took the blood.

5 THE COMMISSIONER: Yes.

6 MR. PERCIVAL: Q. I want to deal with
7 the situation involving Justin Cook and I got the
8 impression that you were looking after four babies in
9 Room 418 and Susan Nelles was looking after Justin
10 Cook and Ms. Christie was looking after one other
11 baby. Is that correct?

12 A. That's right.

13 Q. And I think in Room, on the chart
14 that you have in 379, you have a location of 418
15 below your diagram.

16 A. That's right.

17 Q. And I am trying to orient my-
18 self, does the location of a room, if I move that
19 upward into the diagram, do I take it that those
20 blank lines opposite the cribs, including the crib
21 of Justin Cook, represented the windows going out
22 into the nurses' station and the conference room?

23 A. That is right.

24 Q. Thank you. The occasions when
25 you were looking after these four babies in Room 418,
these were not under constant nursing care, for you



1

2

at least.

3

A. That is right.

4

5

6

Q. Had you ever looked after any
other child under constant nursing care in the course
of your term on 4A/4B with any team?

7

A. No, I haven't.

8

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Q. Do I take it that four babies at least will require your close attention because there are four of them to look after; feedings and vital signs.

A. Fairly close, yes.

Q. Would it be fair to say that up until the time Justin Cook died that you would be in that room more than you would be out of the room?

A. I can't say for sure.

Q. Well, in particular, when you gave evidence to the police officers on March 25th in the first exhibit that we put there, I believe your statement, about two thirds of the way down on page 2 of the typed portion, Miss Brownless:

" When I started my duty at about 7:15 p.m. I was in room 418 constantly until approximately 10:30 p.m. when I left for coffee break".

Was that accurate?

A. Except for getting supplies, yes.

Q. I understand. And getting



1
2 supplies would that mean being out of the room for
3 less than a minute?

4 A. Well, for how long it took
5 to collect bottles, etc.

6 Q. In any event, even after
7 10:30 I know you went for a coffee break but were
8 you looking after any other children aside from the
9 four babies in room 418?

10 A. No, I wasn't.

11 Q. So that you would be either
12 in room 418 or else out having coffee at the nurses
13 station or alternatively having lunch or getting supplies.

14 A. That's right.

15 Q. Thank you. I want to deal
16 if I may, carrying on with the diagram that you
17 have prepared, is there facility or was there a
18 facility on March 21st for curtains or drapes to
19 be drawn around the individual cribs in room 418?

20 A. There are drapes in the room.

21 Q. Are there drapes that go
22 around the individual cots or cribs in the
23 locations shown on exhibit 379?

24 A. Yes, there are.

25 Q. And may I ask you, dealing



1
2 with the crib of Justin Cook that you have marked
3 on this document, do the curtains or drapes go
4 entirely around the crib or is it only around three
5 sides?

6 A. I think it goes entirely
7 around the crib.

8 Q. And I gather the reason for
9 that is the fact that the windows may be open and
10 light may be coming in from the nurses station or
11 the conference room?

12 A. Or if a Doctor is doing
13 some kind of a treatment and wants privacy.

14 Q. Do I take it from time to
15 time that the drapes are drawn around a baby's
16 crib?

17 A. If there are drapes in the
18 room, yes.

19 Q. Well, were there drapes in
20 this room on this night?

21 A. I can't say for sure.

22 Q. Well, from time to time do
23 you recall drapes being in that room at any time?

24 A. Yes.

25 Q. Is there any reason why
they would not be there then on 418 that night?



M4

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A. If the room came out of isolation they would be taken down and washed.

Q. But would it be fair to say that 99 percent of the time, the drapes or curtains are there and available in room 418?

A. Yes.

Q. Thank you. Miss Christie and Miss Nelles then had the obligations within room 418 that night on your assignment?

A. That's right.

Q. There is a TV in that room?

A. That's right.

Q. And the TV is located above the bed of Justin Cook?

A. That's right.

Q. And is it above the windows?

A. Yes.

Q. And is that then very high in the room?

A. I think I said it's about two inches from the ceiling.

Q. Thank you. Is that the only TV set on ward 4A?

A. No, it's not.

Q. Is it the closest room with a



M5 1
2 TV set on 4A closest to the nurses station?

3 A. No, it's not.

4 Q. Is it the room, at least was
5 it the room up until March 21st or 22nd that was
6 commonly used by nurses at times when they wanted
7 to watch TV and they were on a break?

8 A. No.

9 THE COMMISSIONER: Excuse me, Miss
10 Brownless, you can't get much closer to the nurses
11 station than 418, can you?

12 A. 431 also also has a TV.

13 THE COMMISSIONER: But they are
14 the same distance.

15 A. Yes, sorry, I thought
16 either way you could go.

17 MR. PERCIVAL: 431 do I take it
18 was also - 418 was for the sickest children?

19 A. That's right.

20 Q. Generally speaking. And
21 generally speaking they were the youngest children?

22 A. That's right.

23 Q. 431 could have older children in it
24 who would be bothered by TV's.

25 THE COMMISSIONER: That's the other
ward though, isn't it?



M6

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2

A. 4B.

3

THE COMMISSIONER: 431 is an infants

4

room as well.

5

MR. PERCIVAL: 431 is an infants

6

room as well.

7

THE WITNESS: That's right.

8

THE COMMISSIONER: Yes.

9

MR. PERCIVAL: All right. But that's

10

on 4B?

A. Tat's right.

11

Q. Do I take it that then

12

those are the two more likely rooms that if nurses

13

want to take a break on the long night shift that

14

they would go into either room 418 or 431?

15

A. Possibly, yes.

16

Q. Are there rocking chairs in

17

these rooms?

A. There are rocking chairs in

18

every room.

19

Q. How many rocking chairs in

20

room 418?

21

A. One or two.

22

Q. Is there any other chairs?

23

A. There are straight backed

24

chairs, yes.

25



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Q. A number of straight backed
chairs?

A. There is usually one per bed.

Q. So, do I take it that if there
is some interesting films on TV that nurses are
more prone to be watching TV on their breaks, and
I don't suggest they are not entitled to breaks
and they are not entitled to watch TV if you so
desire on breaks.

A. Yes.

Q. All right. This particular
night of Justin Cook's death I understand was the
night when there was some rather interesting TV on.

A. That's right.

Q. And one was Gone With The Wind?

A. That's right.

Q. And immediately thereafter it
was Clark and Lombard, is that right?

A. I don't recall the second film.

THE COMMISSIONER: Isn't it Gable
and Lombard?

MR. PERCIVAL: Gable, I'm sorry.
I am younger than I thought I was.

MS. CRONK: You are missing the
big romances.



M8

1
2 MR. PERCIVAL: I'm showing to you,
3 without showing any favouritism, the Starweek for
4 March 21st of 1981. This may be of some assistance,
5 Mr. Commissioner, it may not be so funny because it
6 will give us some better indication as to times.
7 It shows that Clark Gable, Leslie Howard, Vivian
8 Leigh had the first three hour segment of Gone With
9 The Wind, it ended at 11:00 o'clock. Does that
refresh your recollection.

10 A. Yes.

11 Q. It started at 8:00 o'clock
12 on channel CHCH and ended at 11:00. There was a
13 five minute break and then at 11:05, again according
14 to the Starweek, Gable and Lombard came on and
went to 1:35. That's what the document says.

15 A. Yes.

16 Q. Does that refresh your re-
17 collection as to what was on TV that night?

18 A. I still don't recall the
19 second movie being on.

20 Q. In any event, you certainly
21 believe that the television set was in fact on
after 11:00 o'clock?

22 A. There is a possibility, yes.

23 MR. PERCIVAL: May we have that
24
25



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marked as the next exhibit.

THE COMMISSIONER: Yes, all right.
This is the Starweek of what?

MR. PERCIVAL: March 21st/March
22nd, 1981.

THE COMMISSIONER: 382.
EXHIBIT NO. 382 Starweek of March 21st/22nd,
1981.

MR. PERCIVAL: That particular
evening of the death of Justin Cook, who do you
recall coming in there aside from yourself, Mrs.
Christie and Miss Nelles who were there watching
TV?

A. I can't recall if Mrs.
Christie or Bertha were there or not.

Q. And we heard some evidence
I believe from Bertha Bell that she was in there,
would that surprise you?

A. No, it wouldn't.

Q. All right. What about
Phyllis Trayner, she was certainly in there?

A. That wouldn't surprise me.

Q. Well, no, but I think you
have already given evidence that Phyllis Trayner
was in there looking after Justin Cook at the time



M10

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2

Susan Nelles took the break.

3

A. That's right.

4

Q. Whether or not that was a

5

coffee break or a lunch time break.

6

A. That's right.

7

Q. And it is your recollection

8

that she did in fact relieve Susan Nelles on both

9

those occasions prior to the death of Justin Cook?

10

A. Yes.

11

Q. May I go back to the question

12

of the drapes. Do you recall on the night Justin

13

Cook died from 7:00 o'clock through to 4:00 o'clock

14

I believe when he did die ever seeing the drapes

around Justin Cook's crub being closed?

15

A. No.

16

Q. If you did see those drapes

17

closed, would it be something that you feel that

you would notice and would have remembered?

18

A. Yes.

19

Q. Why?

20

A. Because it would have made

21

it awkward for me to get to my other two children.

22

Q. Well, as I understand the

23

diagram I gather the drapes just go around the crib?

24

A. That's right.

25



M11 1

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Q. They don't encroach on the crib
closest to the back wall or the crib closest to
the door?

5

6

7

A. But if I pull in the doppler
or any machinery or push my crib over the drapes
get in the way sometimes because the rooms are
quite small.

8

9

Q. But do I take it that there
are provisions for drapes around all six of the cots?

10

A. That's right.

11

12

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14

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16

Q. One of the things that you
were asked in the course of your statements was
the fact that you do not recall from the time you
came on shift at 7:00 o'clock to the time one of
the Doctors came on and first started to inject
medication into Justin Cook, you don't recall anyone
giving medication to Justin Cook?

17

A. That's correct.

18

19

20

Q. Do I take it that throughout
that period of time you would be in the room looking
after your own babies?

21

A. The whole time you are saying?

22

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Q. Well, let's put it this way,
aside from the coffee break and the lunch break you
would be there 95 percent of the time?



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A. A fair bit of the time, yes.

Q. Where else would you be?

A. I can't say.

Q. If you saw a nurse going over to Justin Cook's cot and it was a nurse that you were familiar with and had a white - I gather you have white uniforms?

A. No, we wear colours.

Q. Coloured uniforms. But if you saw someone that looked like a nurse in that room that night you wouldn't pay particular attention, would you?

A. If I didn't recognize them?

Q. No, I am talking about if you recognized them, the back of their head, as being someone who should be on 4A and 4B that particular evening?

A. And went to Justin Cook's bedside?

Q. Yes.

A. I wouldn't think it was unusual, no.

Q. But you wouldn't even pay any particular attention to it, would you?

A. No.



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Q. But if you did see someone unusual, or even a Doctor who came over to that bedside you would remember that?

A. I would look to see what he was doing, yes.

Q. That's right. And nothing like that occurred from 7:00 o'clock through to the time that the Doctor came in, I mean, because you were very explicit about a number of Doctors who came in during the course of that shift, you remembered those?

A. Yes.

Q. I noticed that and I was wondering, you didn't see anybody else, aside from those Doctors that you have mentioned and the nurses on the nursing teams that were on that night at the bedside of Justin Cook from the time you came on at 7:00 o'clock through to the time he died?

A. Not while I was in the room, no.

Q. Thank you.

THE COMMISSIONER: What do you think Mr. Percival?

MR. PERCIVAL: I'm going on to another part now, I would be quite happy to break now.



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M14

THE COMMISSIONER: Yes, all right until 2:15 then.

MR. TOBIAS: Excuse me, before we break, it seems obvious that we will be sitting for the best part of the day tomorrow. Can we take that as a fact at this point.

THE COMMISSIONER: Well, I would think that those who can't be here tomorrow would be working very hard to get on this afternoon.

MR. PERCIVAL: Mr. Commissioner, if it may assist my friends, I am going to be probably about another 15 to 20 minutes, no more.

THE COMMISSIONER: Mr. Roland, how long will you be?

MR. ROLAND: I may be 20 minutes.

THE COMMISSIONER: Ms. Symes?

MS. SYMES: 15 to 20 minutes, sir.

THE COMMISSIONER: We might make it, it is possible we might make it. Mr. Rosenberg, how long are you going to be?

MR. ROSENBERG: 10 minutes, 15 minutes.

THE COMMISSIONER: Mr. Labow?

MR. LABOW: Maybe 5 minutes.

THE COMMISSIONER: Mr. Shinehoft?



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MR. SHINEHOFT: I don't think I have any questions at this time, Mr. Commissioner.

THE COMMISSIONER: That leaves us all up to you, Mr. Tobias. I don't mind too much. I have warned Mr. Olah and Ms. Cronk, we might have to sit for them tomorrow but I think we could get through everybody else today and then if we have to sit a bit late we might be able to, if the reexamination is short, we might be able to get through today.

MS. CRONK: Have we heard a statement from Mr. Tobias, sir.

MR. TOBIAS: I thought you were going to ask me, Ms. Cronk, thank you very much.

THE COMMISSIONER: No, I just said it was up to him.

MR. TOBIAS: I would think at this point, subject to what may happen over the lunch hour, you know, sometimes I get really curious over the lunch hour, but I would think 15 minutes to a half hour.

THE COMMISSIONER: Well, I think we might do it. But we will just see what happens at 4:30 and see whether we want to sit later and avoid tomorrow and see what happens.

All right 2:15.

---Luncheon recess.



AA
DM/PS

1
2 ---Upon resuming at 2:15 p.m.

3 THE COMMISSIONER: Yes, Mr. Percival.

4 MR. PERCIVAL: Q. Ms. Brownless, now
5 one of the things I want to talk to you about that
6 has not been previously canvassed is continuing on in
7 that evening when Justin Cook died. Do you recall at
8 any time during the course of that shift, before he
9 died, the I.V. line going into that baby's head
ever going interstitial?

10 A. No, I don't.

11 Q. Do you ever remember anyone
12 talking about it in your presence, or anyone discussing
13 the fact that that I.V. line going into Justin Cook
went interstitial, or went out of the vein?

14 A. I don't recall.

15 Q. That particular afternoon, I
16 think that your notes are fairly explicit, once the
17 Code 25 was called you sort of went and looked after
18 other babies, and in fact you moved one of the babies,
19 I believe, one of the cots out of the room in order to
give the arrest team more room, is that correct?

20 A. I didn't move it out of the room,
21 I moved it out of the way, I pushed the bed back
22 against the wall.

23 Q. Later on at that time,
24
25



1
2
3 towards the end of the shift, and this is found in
4 your notes I believe again on Exhibit 379 that you --
5 I think this is on page 5:

6 "Talked with the girls in the dirty
7 supply with Liz..."

8 I think that is 7:15 on page 5.

9 A. Yes.

10 Q. Now, what was the atmosphere at
11 that meeting, that you can recall, this was after
12 Baby Miller had died on the morning of the 21st;
13 Justin Cook had died on the morning of Sunday,
14 March 22nd. What was the atmosphere at that time
15 of the change of shift when Liz Radojewski came on?

16 A. I know the girls were upset,
17 but that's about all I can recall.

18 Q. Do you recall anyone crying at
19 that point?

20 A. I can't say for sure.

21 Q. Do you recall --

22 A. Possibly.

23 Q. I'm sorry?

24 A. Possibly.

25 Q. Do you recall Liz Radojewski
making some very serious questions of your team about
what happened to Justin Cook?



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A. No.

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Q. That particular day you fully intended to come back on shift as I understand it, that evening at 7:00, it was the short sleep between 12 and 12 when you were supposed to come on.

A. Which day are we talking about?

Q. Were you supposed to come on on Sunday night?

A. Yes.

Q. And you received a call some time that afternoon not to come on.

A. That's correct.

Q. Did I recall your evidence was the fact that you did hear from Phyllis Trayner that night?

A. Yes.

Q. And was it just a general question about whether or not, why were we staying off the shift?

A. My question to her?

Q. Yes.

A. I just inquired why we were off and what was going on.

Q. At some point in time I gather you must have learned at the meeting at Liz Radojewski's



1
2 house the next Monday night?

3 A. Learned?

4 Q. Learned of the meeting, the
5 forthcoming meeting.

6 A. Yes.

7 Q. How did you learn?

8 A. I learned Monday, as far as I
9 can recall, from Liz calling me.

10 Q. Did you go over to Phyllis
11 Trayner's house or apartment that afternoon at 2:00
12 before the meeting at Ms. Radojewski's house?

13 A. I don't think so.

14 Q. Let me ask you a little bit about
15 your past relationship with Phyllis Trayner, prior
16 to that particular weekend. Had you ever been over
17 to her apartment before, for dinner, for instance,
18 and met her husband?

19 A. Not for dinner, but I think I was
20 there one time beforehand, we went skiing once or
21 twice.

22 Q. You went skiing with Phyllis
23 Trayner?

24 A. Yes.

25 Q. And I gather from time to time you
also, after shift, went out for dinner, or went out for



1

2

drinks after shift?

3

A. Both teams 4A and 4B.

4

Q. Well, did Susan Nelles go with
you on those occasions?

5

A. To dinner?

6

Q. Yes.

7

A. Yes.

8

Q. And did you from time to time also
socialize with Susan Nelles?

9

10

A. No, I didn't.

11

Q. Do I take it that what you are
saying is your social interaction with Phyllis
Trayner was more so than with Susan Nelles?

12

13

A. Yes.

14

Q. Did you have any reason to prefer
one over the other?

15

16

A. No.

17

Q. Going back to the afternoon then
on the date of the arrest, March 25th. When the
police came to see you at 8:30 in the morning on March
25th, I gather you had not been back to the hospital
since 7:00 after Justin Cook had died.

18

19

20

21

A. That's right.

22

Q. And had you had any further
communications with Phyllis Trayner up until that

23

24

25



6 2 morning?

3 A. Other than the Sunday evening
4 and the Monday night I don't think so.

5 Q. And had you any discussions with
6 Susan Nelles during that same time period?

7 A. No.

8 Q. Now, the officers then arrived at
9 your home at 8:30, and as I see from Exhibits 380 and
10 381 they left at 12:25.

11 A. That's right.

12 Q. In the midst of taking the
13 second statement.

14 A. That's right.

15 Q. Did they give you any reason
16 why they --

17 A. They had quite a few phone calls
18 while they were there, and then after the last phone
19 call they said they had to go.

20 Q. So they didn't give you any
21 indication as to what the reason was that they
22 changed or had to leave?

23 A. That's right.

24 Q. But they said they would be back
25 to see you?

A. That's right.



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Q. Do I take it at that point in time, 12:25 on Wednesday, March 25th, you had no understanding at that point what was happening, what was happening with the rest of the team?

A. That's right.

Q. You know though that the police were interested in relation to the events involving the death of Justin Cook?

A. Yes.

Q. And did you suspect at that point that probably the police were also questioning the other members of the team?

A. I can't recall if they told me, because I said I was supposed to go over and have lunch with Phyllis that day, they said, don't worry, somebody is talking to her this morning, too.

Q. When had you made the arrangements to go to lunch with Phyllis Trayner?

A. Weeks before that.

Q. Then do I take it after they left then, again according to the time period of 12:25, did you then phone Phyllis?

A. Yes.

Q. And was she able to talk to you?

A. No, she wasn't.



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Q. Because the police were still with
her, is that correct?

4

A. That's correct.

5

6

Q. And then did she phone you back
at some time.

7

8

A. She said she would call me back
when they left.

9

10

Q. What time do you recall she called
you back?

11

12

A. I thought it was around 3 or
3:30.

13

14

Q. Did you then go immediately over
to her apartment?

15

16

A. Yes.

17

18

Q. And do you recall what time you
arrived there, to the best of your recollection?

19

20

21

A. 4:30, 5:00.

22

23

Q. Perhaps this may be of some
assistance to you.

24

25

Mr. Registrar and Mr. Commissioner,
could the witness have before her Exhibit 32-A, tab
17, being the notes of Mrs. Radojewski.

A. I have it.

Q. Do you have that in front of
you?



1

2

A. Yes.

3

4

Q. And if you look at the top of
page 8 and she's talking about Ann Evans:

5

"Ann confirmed Susan was in custody..."

6

A. Excuse me, what tab?

7

8

Q. Tab 17, and I believe it is page
8, a third of the way down the page, I will wait until
you get it.

9

A. I have it.

10

MR. PERCIVAL: Perhaps, Mr. Commissioner,
I will wait until you have it.

11

12

THE COMMISSIONER: Well, my page is not
numbered, and I never got around to it. Page 8 starts:
"Second call about 3:30".

13

14

MR. PERCIVAL: No, it says: "Also
two officers", tab 17.

15

16

THE COMMISSIONER: That by mine would
be somewhere around page 10.

17

18

MS. CRONK: Sir, just to assist you,
you will recall Mrs. Radojewski herself numbered 10
of those pages.

19

20

THE COMMISSIONER: Oh yes, yes.

21

MS. CRONK: Page 8 was her numbering.

22

23

Q. Do you have that there, Ms.

24

25

Brownless?



1

2

A. Yes, I do.

3

Q. About a third of the way down the

4

page:

5

"Ann confirmed that Susan was in

6

custody and the other team members were

7

to come in for a meeting at 7 p.m. in the
north conference room at the hospital.

8

I called each of them, Phyllis was

9

extremely upset. The police officers had

10

been there since 8:30 and had just left

11

when I called at 1430, or 2:30 p.m.

12

They had told her that Susan was arrested.

13

I tried to get her calmed down and told

14

her the best way to help Susan was to

15

sit down and write down the statements

16

she had made to the police. She told me

17

they had written 24, 26 pages, she had

18

read them, made one or two corrections

19

and signed them. I told her to call her

20

husband and not to drive down to the

21

hospital herself, I would meet them at

22

one of the back entrances.

23

I called Mrs. Christie and she told me

24

the two officers had come to speak with

25

her. She said they asked her if she knew



1
2 why the baby died. She told them she
3 had no idea why that baby died. I also
4 asked her to come down to the meeting at
5 7 and I would meet her at the emergency
6 entrance.

7 I called Mrs. Scott who did not give any
8 indication of being visited by the
9 police and she would come in for the
10 meeting at 7 through the same back
11 entrance as Phyllis.

12 I was unable to get Janet at home but
13 I tried Phyllis again, remembering that
14 Janet had said something about having
15 lunch with Phyllis, and Janet was there.
16 However, at that time she, Janet, did
17 not know that Susan had been arrested
18 and I asked Phyllis not to say anything.
19 I knew that there was to be a news
20 release by the hospital and the police
21 department later that day and I couldn't
22 tell anyone until I heard from
23 Ann. The news broke over the
24 television at 4 p.m. and we called
25 our staff together to inform them.
They were stunned and devastated."



1

2

Now, do you recall ever seeing that document before I just read it to you today?

4

A. No, I didn't.

5

Q. It would appear, at least so far as the recollection of Mrs. Radojewski, that she called you some time after 2:30 and before 4:00.

7

A. Yes.

8

Q. Do you recall while you were present in Phyllis Trayner's apartment that afternoon a phone call coming to her?

10

11

A. I can't say if there was one or not.

12

13

Q. Well, when you got over there and before it became known to you at least that Susan Nelles had been arrested, was there any discussion with Phyllis Trayner about the police officers having come and taken statements from both you and Mrs. Trayner?

16

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A. I can't say if we did or didn't talk about it, I am sure we did talk about it.

19

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Q. I am sure you possibly did. Have you ever been questioned by police officers before?

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A. No.

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Q. Had Phyllis indicated that this



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was something new to her as well?

A. That's right.

Q. Did you then at that point start speculating why they were asking questions about the death of Justin Cook?

A. I think at that point Phyllis told me Sue was being arrested.

Q. And do I take it then that she did tell you and you didn't hear it over the television?

A. That's correct.

Q. Now, I think you told Ms. Cronk yesterday, or the day before, that you have some difficulty in remembering whether you went to this conference, north conference room at 7:00 as Mrs. Radojewski has indicated that everybody was invited to go.

I note in looking at Exhibit 379, which are your notes as a matter of course, at the bottom of-- in fact at the back of the diagram, the very bottom, you seem to have noted:

"North conference 10 to 7 at Emerg."

Now, I suggest to you what that means is, meeting at the north conference room at 10 to 7 p.m., come through the emergency entrance, just like Liz



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Radojewski told everyone else to do.

A. That's correct.

Q. Does that refresh your recollection, the fact that you would even put that in that document, that you were at that meeting?

A. I recall going to the meeting, but I don't recall what the meeting was about.

Q. Well, it was a two hour meeting, do you recall that?

A. I don't recall how long it was.

Q. Well, do you recall, at page 10 of Liz Radojewski's notes there was even a psychiatrist present that day. Do you remember a psychiatrist being present?

A. I can't say for sure who was all there.

Q. Well, it looks like he was the only male individual at that meeting.

A. Mr. Snedden was there.

MR. OLAH: No, Mr. Snedden was there.

Q. Mr. Snedden, I'm sorry. Do you recall Mr. Snedden being there?

A. I can't say for sure, possibly.

Q. Had you ever met with Mr. Snedden yourself personally, before?



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A. No.

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Q. And you do not recall meeting
with him on this occasion?

4

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A. No, I can't.

6

Q. Is there a difficulty that these
events start to blurr after a while? I am trying
to understand why that wouldn't stand out in your
memory that you met the administrator of the hospital.

8

9

A. I think I was still in shock about
hearing Sue was arrested.

10

11

Q. I understand. Now that particular
afternoon, and I don't want to go through this again,
but I wasn't quite sure about your precise recollec-
tion of what Phyllis Trayner said about the arrest of
Susan Nelles. What were the exact words that you can
recall, because I don't have the transcript from
this morning, and I know that is when you gave that
evidence. I tried to take it down but I would like
you to tell me, if you would.

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A. When we were watching the
television?

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Q. No, I am talking about March
25th.

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23

A. Okay. Phyllis said:

24

"Why her, why not me. I was there

25



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when she was, or just as much as she was."

3

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Q. Did you get from that that she felt that Susan Nelles had been improperly arrested, is that what you took from that?

5

6

A. Possibly, yes, I didn't really think about the comment she made.

7

8

Q. Did she seem excited about the fact that Susan Nelles had been arrested and she had not been?

9

10

11

A. I don't think she was excited, no.

12

13

Q. Can you think of anything in the last four years that was more exciting to you than the events of that day?

14

15

A. What do you mean by "exciting"?

16

Q. Well, is there anything more traumatic that has occurred in your life?

17

18

A. No.

19

20

Q. Did you get the impression that she was unhappy, I'm talking about the afternoon of March 25th, that Phyllis Trayner was unhappy that the police had not paid as much attention to her as they had to Susan Nelles.

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A. No, I didn't get that impresssion.

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Q. May I take you then -- you didn't work; you went to the meeting on March 25th. Did you see Phyllis Trayner again? I think you went out of town, I think you told us?

A. Yes.

Q. It is your belief that that is the time when you put together at least part of Exhibit 379?

A. Most of it, yes. Pretty well all of it.

Q. And when you saw her at the request of Liz Radojewski, your recollection is it was on a Friday night?

A. That's right.

Q. When you went with your mother?

A. That's right.

Q. And I think that you utilized the adjective at that time, "Phyllis Trayner was upset", although you didn't agree with Mr. Hunt; that you wouldn't use the adjective that she was "obsessed"?

A. I didn't use that, no.

Q. You wouldn't agree that that is what would describe her apparent state of mind or problem at that time?



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Q. Aside from being upset, do you agree with me that you hadn't collected all the newspaper clippings in the course of two or three days?

A. That is right.

Q. And you hadn't watched every news broadcast?

A. I wasn't in the city to be able to do that.

Q. Now, they do have television up north?

A. That's true.

THE COMMISSIONER: Some people do.

MR. PERCIVAL: Q. Did you have television up north?

A. Yes.

Q. Did you watch every one of them?

A. No, I didn't.

Q. You didn't flip channels?

A. No, I didn't.

Q. Did she repeat on this occasion, on the night of the 27th, that comment: "How come she got charged? Why not me?"

A. Did I repeat it to who?



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Q. Did Phyllis Trayner repeat
that to you?

A. No. She said it once and
that was it.

Q. Then do I take it that,
aside from going over to her place on one or two
occasions when you were going skiing, at the time
you went over on March 25th and then on March 27th;
so you had been at her apartment on three or four
previous occasions then up until that time?

A. That's right.

Q. Did you ever go back to her
apartment after that night of March 27th?

A. I can't say if I did or not.

Q. Did you ever socialize with
Phyllis Trayner thereafter?

A. I don't think I did, no.

MR. PERCIVAL: No further questions.

THE COMMISSIONER: Mr. Roland.

CROSS-EXAMINATION BY MR. ROLAND:

Q. Miss Brownless, my name is
Ian Roland and I act for the Hospital.

A couple of questions about a report.
You told us that when you were on long nights, you
would come to the Hospital at about seven o'clock and



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from about 7:15 sometimes to as long as eight o'clock,
you are at report?

A. That's right.

Q. I take it the other nurses
on your team and nursing assistants on your team
would be at the report as well during that period of
time?

A. Everybody coming on nights
is at report.

Q. It is at the end of report
that you then go to your babies and take vital signs
and so on?

A. That is right.

Q. That is often about eight
o'clock?

A. That's right.

Q. Just so that we are not
under any misunderstanding, I gather that the nurses
that are on the long day shift stay with the babies
until you relieve them?

A. That is right. Sometimes
some girls go home early and other nurses will cover
their patients also.

Q. Yes, but the babies aren't
simply left unattended while you are at report?



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A. Oh, no.

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Q. With respect to vital signs,

4

you have told us the times that you traditionally

5

take vital signs, and I gather that involves generally

6

taking the apex and temperature and pulse and blood

7

pressure; those sort of things?

8

A. That's right.

9

Q. And how long would that take
approximately to do that per child?

10

A. Per child?

11

Q. Yes.

12

A. Five minutes.

13

Q. And I gather, from time to

14

time, while you are doing that, some babies may be

15

restless from the very operation of taking their

16

vital signs; that might cause them to be restless?

17

A. It takes longer to settle
them, yes.

18

Q. For instance, if you have a

19

cold stethoscope, I gather, like adults, babies don't

20

like much being touched by a cold stethoscope?

21

A. That is right.

22

Q. That might unsettle them?

23

A. That is right.

24

Q. So, is it fair to say that

25



BB6 1
2 five minutes is the average or that it may -- or it's
3 the longest period of time it would take for a child
4 or it might take longer?

5 A. It takes longer.

6 Q. How long would it take at
7 the outset, maximum, per child to take vital signs?

8 A. If I don't feed them or
9 anything like that?

10 Q. Just taking vital signs per
11 child?

12 A. I could say fifteen or
13 twenty minutes, if I had to settle them afterwards.

14 Q. Yes. All right.

15 Let me ask you about the nasogastric
16 tube used for feeding. You have told us, as a
17 Registered Nursing Assistant, you are not permitted
18 to insert a nasogastric tube but, once it is inserted,
19 you will use it for feeding the babies assigned to you?

20 A. That is right.

21 Q. And this topic was raised
22 with respect to Baby Adamo when you told us that there
23 are three sizes of nasogastric tube; 3.5, 5 and 8.

24 A. And they go bigger than that.

25 Q. I see. Those are the ones
traditionally used for small infants, I gather?



BB7

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A. That is right.

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Q. On this ward, 4A and 4B,
there would traditionally be the size 5 and size 8?

5

A. Yes.

6

Q. And I gather an 8 is the
biggest of those three and the 3.5 is the smallest?

7

A. That is right.

8

9

Q. Those numbers, I gather,
represent the aperture opening of the tube, do they?

10

A. That's right.

11

12

Q. They measure the aperture
opening?

13

THE COMMISSIONER: These are inches,
of course, are they?

14

THE WITNESS: Pardon me?

15

THE COMMISSIONER: Inches?

16

17

THE WITNESS: No, the lengths. There
are different lengths. There are different sizes.

18

19

THE COMMISSIONER: What is the 3.5,
though, and the 8; what are they? What measurement?

20

THE WITNESS: It is how round the
tube is, how big it is. It is not inches.

21

22

THE COMMISSIONER: Millimetres or
something?

23

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MR. ROLAND: I am not sure what
measurement it is. It is certainly an indication of

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the aperture opening; not the length of the tube, as
I understand it.

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A. That is right. They come
in different lengths.

5

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THE COMMISSIONER: It must represent
some kind of -- would it be a millimetre?

7

8

MR. ROLAND: I'm not sure. We will
try and find out. I am not sure what it is. It is
certainly not inches.

9

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THE COMMISSIONER: I would think it
would be a little on the large side. Of course,
they could be, like, as far as I know, shoe sizes, or
just sizes.

12

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MR. ROLAND: That is what I mean.
I am not sure whether it is simply a size or whether
it is actually a measure of --

15

16

THE WITNESS: A size 3.5 -- or 5,
would be about as wide as this cord here.

17

18

THE COMMISSIONER: As wide as...?
What did you say?

19

20

THE WITNESS: This cord right here.

21

MR. ROLAND: As wide as the cord.

22

THE WITNESS: That would be about a
size 5.

23

24

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MR. ROLAND: It shows you how very



BB9

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small they are.

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A. That's right.

4

Q. I gather that when you are

5

feeding a baby with a nasogastric tube and if you

6

are feeding formula, it is easier to feed with the

7

larger aperture opening, especially with a formula

8

that is viscous, denser than water?

9

A. The size doesn't matter. You

10

can regulate the drip, how fast you want it to go in;

but you don't want it to go in too fast.

11

Q. I see. So, the size makes

12

no difference in the facility of feeding a baby?

13

A. That's right.

14

Q. All right.

15

Let's then turn to the evidence you

16

have given about Baby McKeil and about what you saw

17

the night that Baby McKeil - you think it is Baby

18

McKeil - arrested, and particularly the tray on the

19

monitor and, as I recall your evidence, you described

that as a metal tray, as a silver tray?

20

A. That is right.

21

Q. It would be a stainless

steel tray, I take it?

22

A. That's right.

23

Q. And you have also told us you

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are familiar with the crash carts?

A. That's right.

Q. In fact, you have restocked
the crash carts?

A. That's right.

Q. And you did so during the
nine-month period we are talking about?

A. That is right.

Q. And on the crash carts
themselves there is, as I understand it, a tray on
the top called a resuscitation tray?

A. That is right.

Q. And that resuscitation tray
contains a number of things, including some syringes
containing medications?

A. On the silver tray.

Q. Yes, on the silver tray.

A. In the basket?

Q. On the crash cart.

During the nine-month period --

A. I am trying to think back
that far. I can't say for sure.

Q. Let me help you with that.

There has been put in Exhibit 295,
which is a list of those things found on the



BB11

resuscitation tray.

A. Okay.

Q. Do you recognize that?

A. Yes, I do.

Q. And we see on Exhibit 295,
on the resuscitation tray, there is included adrenelin,
calcium gluconate and sodium bicarbonate.

A. That is right.

Q. As I understand, those are
already made up in syringes?

A. This tray is covered by a
plastic bag, too, with an "out" date on it.

Q. Yes. And is the same tray
by size and appearance that you saw in the room of
Baby McKeil?

A. No.

Q. Is this a larger --

THE COMMISSIONER: Did you say, yes?

THE WITNESS: I said, no.

MR. ROLAND: Q. Is it a larger tray
or is it a smaller tray?

A. It is a smaller tray. It is
about 9 x 13, flat like a serving tray.

Q. That is the tray in Baby
McKeil's room?



1
BB12 2 A. That is the tray I saw, yes.
3 Q. It is smaller than the
4 resuscitation tray?
5 A. Yes.
6 Q. And you know the appearance
7 of the epinephrine and the calcium gluconate and the
8 sodium bicarbonate on the resuscitation tray, I gather?
9 You know what they look like in the syringes?
10 A. If I read the -- yes, I
11 would, but I couldn't identify them now.
12 Q. I see. But you recall what
13 they look like at the time?
14 A. Yes.
15 Q. Are those what you saw on
16 this tray in Baby McKeil's room? Did they have the
17 same appearance?
18 A. I can't say because they
19 were covered in a sterile towel.
20 Q. Were you able to see any
21 of the medications under the sterile towel?
22 A. I didn't lift the towel to
23 look to see what medications were under there.
24 Q. So, you really don't know
25 what was under that sterile towel? There may or may
not have been medications?



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Q. What you saw, then, was a metal tray, a smaller metal tray with a sterile towel over it?

A. And I presume there was syringes underneath there. I don't know why I thought that. Maybe at one time I did see them.

Q. But you have no recollection of seeing them?

A. I have a fairly good recollection, yes.

Q. You are certain in your mind there were syringes?

A. I didn't read what they were.

Q. Yes. I see. I take it, to see them, you would have to lift the sterile towel that was covering the tray off it?

A. That is right.

Q. Did you do that?

A. I can't say if I lifted it. I could have seen something else underneath it, but I know I did see syringes under there.

Q. Did you look in Baby McKeil's room at some earlier time than the time that you saw this tray and not see the tray on the monitor?

A. I can't recall when I first



1
BB14 2 saw the tray on the monitor.

3 Q. Could it have been on the
4 monitor even on the shift before the one that you
5 were on that day?

6 A. I don't think so.

7 Q. So, you think you looked into
8 the room and didn't see the tray at some earlier
stage then?

9 A. That is right.

10 Q. I have shown you Exhibit 295
11 and, in particular, the drugs you have seen that are
12 on the resuscitation tray. Are those drugs used
13 from time to time, to your knowledge, in a Code 23
situation?

14 A. Yes.

15 Q. That is when a baby is
16 in heart failure those drugs may be used, even though
17 his heart hasn't yet stopped?

18 A. That's right.

19 Q. And those drugs then, I take
20 it, might be brought into a room without a crash cart?

21 A. That's right.

22 Q. And kept beside a baby's
23 bed if the baby is in heart failure and it is thought
they might be needed?

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A. I only saw it on the one
occasion.

Q. You haven't seen it since?

A. No, I have it.

Q. Does it make sense to you
that it would be in a situation where babies are in
heart failure? Do you find it peculiar, those drugs
being there?

A. At the time?

Q. Or now, from your experience?

A. Now, the girls are very
careful.

Q. Yes.

A. And the medications are
pre-drawn up and locked up in the box anyway; so, if
they need a medication, they just bring the box in.

Q. From what you know, I take it
from your own experience, those drugs are used even
in a situation where the baby's heart hasn't yet
arrested, if the baby is in heart failure?

A. I can't say which drugs, but
some of them, yes.



BmB.jc
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Q Let's turn to Baby Cook's

chart and, in particular, page 65 and 66, which are
the flow sheets for Baby Cook.

A I have it.

Q And I note that if you look on
page 65 there is, under the heading Input, PO8 hours,
there is shown about a third of the way down a
figure, it looks like 279. That appears to be at
the end of, I guess it is the night shift on March
20th. That I take it measures the volume of feed,
liquid feed that Baby Cook received during the
preceding shift?

A That's right.

Q Yes. And then at the bottom
again it appears 1900 hours there is the figure 220
and that is again his input, I gather a measure of
the volume of his feed in the 12 hours following the
last entry?

A That's right.

Q And then finally on page 66 is
the volume of his feed 190 up to the time of his
arrest?

A That's right.

Q Yes. And I gather then, as
this chart discloses, it is the practice to indicate



CC.2

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how much the baby consumed in these liquid feeds during a shift by indicating the volume at the end of the shift?

5

A. That's right.

6

Q. And that's the total volume throughout that shift?

7

A. That's right.

8

Q. And then we have already seen to look to the times that the feedings actually occurred you go to the nurse's notes and they indicate the times that the feedings occurred?

9

10

11

12

A. They do in this chart but you don't always have to put the times down.

13

14

Q. I see.

15

THE COMMISSIONER: I'm sorry, where do you get the times?

16

MR. ROLAND: Well, we have seen from the nurses, I think it is page ...

17

18

MS. FORSTER: It is page 28, sir.

19

THE COMMISSIONER: But this is the nurse's notes, there is no form.

20

21

MR. ROLAND: There is no form but the narrative in the nurse's notes, the progress notes indicate the times, in this case 8:30 in the evening.

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CC. 3

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THE COMMISSIONER: And what page are you referring to now?

MR. ROLAND: This is page 28 at the bottom.

THE COMMISSIONER: 28?

MR. ROLAND: Right, at the bottom, it says: "Nutrition: tolerated two feeds at 2030" that is 2:30 in the evening and 2:30 in the morning.

THE COMMISSIONER: Yes, but that's optional or discretionary or something whether you put in the nurse's notes, whether you put in anything about the feeding. There is no form that you fill in the way you do with medications?

THE WITNESS: That's right. There is a flow sheet that we keep at the bedside that is disposable but we can keep a record of what time the child was last fed.

MR. ROLAND: Q And I gather that apart from the times that you feed the baby you will from time to time leave a bottle by the baby's bedside, especially if he hasn't completed or taken all the bottle that was prepared for him?

A. It is not my practice to do that.

Q. Is that done from time to time?



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A. After a baby took a bottle
and the child wasn't going to drink it within an
hour the girls would throw it out.

Q But in that hour it would be
left by the bedside?

A. Yes.

Q Yes. And I gather if the
baby was restless or crying, and babies cry I gather,
wake up and cry during your midnight shift?

A. That's right.

Q You would go to the baby and
you would try and calm the baby and one of the ways
you do it is, you try and give him some of the
feed that was left in the bottle?

A. Not necessarily because some
of our children are on food restrictions and if it
wasn't my child and I didn't know the restrictions
I would get the nurse who was looking after him if
I couldn't settle the child.

Q But if it was your child you
would do that, I take it?

A. That's right.

Q You would try and feed him
some of the liquid in the bottle that he hadn't taken
at his regular feed?



CC.5

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A. If he could have the amount,
yes, I would.

3

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Q And putting the bottle in his
mouth I take it would also assist in soothing and
settling down the baby?

5

6

A. That's right.

7

8

Q Even if he didn't take any of
the liquid in the bottle?

9

A. That's right.

10

Q And you say you think you saw
Phyllis Trayner feeding Justin Cook at about midnight,
you told us that?

12

A. That's right.

13

Q How long did you watch her?

14

A. I can't recall.

15

Q I mean, did you see her actually
feeding or could she simply have been trying to
settle the baby by using the bottle?

17

18

A. I don't recall if Justin took
anything at all.

19

20

Q Yes, all right. You just
don't know one way or the other?

21

A. That's right.

22

Q And that's because you don't
recall how long you watched Phyllis Trayner with
Justin Cook?

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CC.6

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A. That's right, and I wasn't standing to see if there was any bubbles coming up from the bottle.

Q Yes. One other thing with respect to Baby Cook - if I can find the doctor's orders. If you turn to page 14 of the chart.

A. I have it.

Q At the bottom, the doctor's orders, the very bottom of the chart we see NPO from 400 hours on March 22nd. That means that Justin Cook should not receive any food by mouth, as I understand it, after 4 o'clock in the morning?

A. That's right.

Q And that I take it is because when you look at the top of that page we see the doctor's order OR tomorrow, that means that he is expected to go to the OR for an operation on the 22nd?

A. That's right.

Q And it is of course common practice not to feed a patient, including a baby, immediately before an operation?

A. Pardon me?

Q It is common practice not to feed a baby immediately before an operation?

A. That's right.



CC.7

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Q And I gather that explains then,
the operation explains why there is that order 'no
feed after 4 o'clock'?

A That's right.

Q All right. Finally, with
respect to Jordan Hines, Miss Cronk asked you if
there was any suggestion that he might deteriorate
and die when you last saw him on the shift that you
were on immediately before his death and you answered
no.

Let us presume for the moment that
Jordan Hines died of Sudden Infant Death Syndrome,
because there has been some suggestion of that and
I would ask you to make that presumption. In your
experience would there be any indication of deterioration
in a baby's condition some time before a baby died,
if he died of Sudden Infant Death Syndrome?

A I have never looked after a
SIDS baby before.

Q I see. So, you don't know
whether or not there are signs of deterioration in
those circumstances or not?

A I don't know.

MR. ROLAND: Thank you, those are all
the questions I have.



CC.8

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THE COMMISSIONER: All right, thank
you. Miss Symes?

4

Oh, I'm sorry, just a second,
Mr. Ortved?

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MR. ORTVED: I have no questions of
this witness, Mr. Commissioner.

7

CROSS-EXAMINATION BY MS. SYMES:

8

9

Q Ms. Brownless, my names is
Symes and I represent the Registered Nurses Association
of Ontario and 39 individual nurses. First of all,
Ms. Brownless, as a Registered Nursing Assistant are
you licensed by the College of Nurses of Ontario?

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11

12

A Yes.

13

14

Q And as such is your practice
to be a registered nursing assistant governed by the
Standards of Nursing Practice put out by the College
of Nurses?

15

16

A Yes.

17

18

Q Mr. Registrar, could you show
her Exhibit 292.

19

20

Ms. Brownless, this has been
identified as The Standards of Nursing Practice for
the College of Nurses of Ontario. Have you seen this
document before?

21

22

23

A RNA's have a different document.

24

25



CC.9

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Q It says "for Registered Nurses
and Registered Nursing Assistants" on the cover.

4

A I have never seen this one.

5

Q Could you turn to page 12 of it.

6

A I have it.

7

Q Have you seen the minimum
standards and criteria for registered nursing
assistants that are contained in that page and the
next five pages?

10

A Have I seen it before?

11

Q Yes.

12

A It is probably in the book I
have at home.

13

14

Q And then in the appendix
there is in Schedule A the nursing skills that are
authorized by the College of Nurses for registered
nurses and registered nursing assistants. Have you
seen a list similar to this as to what skills you
are permitted to do as a registered nursing assistant?

15

16

17

18

A Yes.

19

20

Q Would you agree with me that
registered nursing assistants, the skills that they
are licensed to do, are less than those of a registered
nurse?

21

22

23

A Yes.

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CC.10

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Q And in particular at the
Hospital for Sick Children you are further restricted
even beyond this document as to the nursing functions
that you can do?

A. That's right.

Q Now, I'd like to ask you about
the night that Allana Miller died, that is, the night
of the 20th and the 21st. But I'm going to ask you
in terms of the recording in Justin Cook's chart. Do
you have this chart in front of you, Exhibit 116?

A. Yes, I do.

Q I gather then on the night
that Miller died that you had been sent relieving?

A. That's right.

Q Is that because the nursing
needs were perceived to be less on 4A than they were
on 7A?

A. That's right.

Q And I gather that it was your
turn to go relieving?

A. That's right.

Q When you came to the ward
did you have any idea that you would be sent
relieving before you arrived?

A. No, I had no idea.



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Q. And I gather that at coffee break you learned that you would be coming back to Wards 4A?

A. That's right.

Q. And I believe you told Ms. Cronk that the reason was that Justin Cook was going to be an emergency admission?

A. That's right.

Q. And if you look on page 5 of Cook's chart is this a sort of a computer printed sheet for the flow of patients through the Hospital?

A. This is one of the admission sheets they come up with.

Q. It seems to be stamped with the time of 2300 on March 20th, 1981?

A. That's correct.

Q. Would that be when he was admitted to the Hospital or to the ward?

A. When his parents registered him when they went to Admitting and filled out these forms that's the way I understood it but I might not be correct.

Q. Now, I gather then that your return to Wards 4A had tipped the balance between the nursing needs for 4A and 7A?



CC.12

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A. That's right.

3

Q. That is, one more patient,

4

Justin Cook, meant that 4A was entitled to one more nurse?

5

A. That's right.

6

Q. And that when you came back to

7

4A one of the things that Phyllis Trayner did was juggle the nursing assignments?

8

9

A. That's right.

10

Q. Was that essentially to allow

11

Susan Nelles to spend a lot of her time with Justin Cook?

12

A. I think she assigned her to

13

two patients that night.

14

Q. And do you know the state of

15

health of the other child that she was assigned to?

16

A. I don't recall what Allana's

17

condition was when I came downstairs.

18

Q. But this one additional patient

19

on this ward meant you got a whole more nurse?

20

A. That's right.

21

Q. Is that to reflect the fact

22

that Justin Cook was considered to be very ill on the time of admission?

23

A. I think that was the girls'

24

impression, yes.

25



CC.13

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Q. And if we look at the chart for that night of admission on page 26, I believe it starts.

A. I have it.

Q. This is Miss Nelles' notes for the night of March 20th starting at 11 p.m. She has charted that the baby was admitted accompanied by the parents to the ward. Were you there when the parents came with the child?

A. I don't recall. I think I was still upstairs at 11 o'clock.

Q. And there is a statement that the child was found to be very cyanotic, the hands, feet and lips were very dark blue. Is that an indication of really poor health?

A. That the child could have been in distress, yes.

Q. And I gather that some tests were done it says that there is an ECG and blood gases were done.

A. That's right.

Q. Where would those tests have been done?

A. Possibly in his room, 418.

Q. And at 11 p.m. at night would



CC.14

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2

the doctors have to be in attendance when those
tests are done?

4

A. They have to do them.

5

6

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8

Q. And I gather after the tests
were done there is an indication that the child was
very short of breath due to long crying periods
during the blood work and tests. Do you see where
I am reading?

9

A. Yes, I do.

10

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DD
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Q. Is that an indication that it would have taken some time to have done these tests and that is what would have caused the distress to the child?

A. That's right.

Q. And obviously these tests have produced crying. The next question is, does the crying produce increased cyanosis?

A. Yes, it does.

Q. And then there is a statement that the baby was taken for echo by Dr. Schaffer, do you see that line?

A. Yes, I do.

Q. And I gather then that the echo cardiogram was not done in 418?

A. That's right.

Q. Does that fit with your recollection?

A. I don't recall for sure. I didn't know he went for an echo that night.

Q. Let me ask you the other.

Is it physically possible to do an echo cardiogram in Room 418?

A. Yes, it is.

Q. That requires bringing in a



portable echo cardiogram?

A. Yes.

Q. And would you have noticed that machine come to the ward?

A. Yes, I would have.

Q. Can you tell us why?

A. Because it is extremely big.

Q. And do you recall that coming to the ward?

A. No, I don't.

Q. At 11 p.m., or after, on a Saturday night who would accompany the child and the doctor to the echo cardiogram?

A. The nursing looking after him.

Q. And have you ever gone down to an echo cardiogram with a child?

A. Have I?

Q. Yes, ever.

A. I can't recall if I did or not.

Q. Any time since you have been there for four years?

A. Usually transportation takes the child.

Q. Do you have any idea how long an echo cardiogram usually takes?



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A. It takes a fair while, about half
an hour.

3

4

Q. And I gather after the echo
cardiogram was done the patient was returned to the
ward, is that correct?

5

6

A. That's right.

7

8

Q. And then was settled and fed 90
cc.'s of Sim, that is, --?

9

A. Similac.

10

Q. Similac?

11

A. That's right.

12

Q. Did you feed the baby?

13

A. No, I didn't.

14

Q. Is it reasonable that Susan
Nelles would have fed the child?

15

A. Yes.

16

Q. Now, you had three patients
and certainly by the time that child came back from
echo cardiogram you would have been in 418 with your
three patients.

19

A. I can't say for sure.

20

Q. You would have seen them at

21

least once.

22

A. Yes, I would have.

23

Q. And there seems to be an indication

24

25



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at the end:

3

"Parents very upset but left the ward
after talking to Dr. Schaffer."

4

Do you see that?

5

A. Yes, I see it.

6

Q. Did you see the parents in 418?

7

A. I can't recall if I saw them or

8

not.

9

Q. Can you recall whether or not they
left before or after the Miller arrest?

10

A. I think it was before.

11

Q. Now, it is clear from page 26 of

12

Cook's notes that Dr. Schaffer, he was the fellow
that night, wasn't he?

13

A. Yes, he was.

14

Q. And Dr. Soulioti was the resident
that night?

15

A. Yes.

16

Q. That they had spent a fair amount
of time on the ward with Cook that night.

17

A. According to this note, yes.

18

Q. Would you agree with me that it

19

looks as though they had been there from 11 p.m. at
night for some period of time?

20

A. That's right.

21

22

23

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25



1
2 Q. And in fact do you have any
3 recollection of them leaving the ward other than to go
4 to the echocardiogram before Miller's arrest?

5 A. I can't say for sure if they left
6 the floor or not, but I don't think they did.

7 Q. Now, on other nights on the ward
8 would it be unusual for doctors to spend time on the
9 ward?

10 A. No, it wouldn't.

11 Q. In other words, would doctors
12 come to the ward, Ward 4A and 4B just to check patients?

13 A. That's right, if they were in the
14 hospital.

15 Q. In other words, they wouldn't
16 have to wait for an arrest to be called, or a Code 23
17 before you would see them there?

18 A. That's right.

19 Q. Sometimes did a doctor just drop
20 in, or just drop by?

21 A. Yes, they would.

22 Q. Did a sociable one sometimes
23 stay and have coffee?

24 A. Yes, they did.

25 Q. And some of the really sociable
ones, would they make a practice of coming by and talking



1

2

with the nurses?

3

A. Some of them did, yes.

4

Q. And some doctors passed through
your wards en route to the residents' wing?

5

A. That's right.

6

7

Q. And if they smelled coffee
brewing would they just avail themselves and sit down
and have a cup of coffee?

8

9

A. Yes, they would.

10

11

Q. So in other words, on a typical
long night, it would not be the least bit unusual for
doctors to be on your ward at night.

12

13

A. I can't say every night, but
sometimes, yes, we would see them.

14

15

16

Q. In other words, if you saw a
doctor that was sitting and having coffee, or walking
through the halls, that would not be an unusual event.

17

18

19

20

21

A. Walking through the halls, no, I
wouldn't find it unusual because they had to go to
the residence which was just down the hall.
If they had been on our floor before for a month
they possibly stopped if they saw a nurse that they
knew.

22

23

24

25

Q. So a resident who might have
been on the ward during his rotation at some prior



7 1
2 time might stop by for social reasons?

3 A. That's right.

4 Q. Were there some doctors who just
5 didn't sleep well and preferred to come and see their
6 patients, check on their patients rather than sleep?

7 A. Some go to bed quite late, yes.

8 Q. Now, the next night, that is, the
9 night that Cook died, there were six patients in
10 Room 418, that is a full room.

11 A. That's right.

12 Q. And there were three different
13 nurses assigned to the care of those patients?

14 A. That's right.

15 Q. And in addition you have said
16 that the team leader would be responsible for giving
17 the RNA's medication.

18 A. That's right.

19 Q. She is the only likely candidate,
20 isn't she, because the other RN was assigned to constant
21 nursing care.

22 A. That's right. I don't know if
23 there was any other RN working that night, I can't
24 recall.

25 Q. Could you check the assignment
book, please?



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2

MR. OLAH: Page 178-179.

3

Q. Mr. Olah has shown you that.

4

A. That's right.

5

Q. So Ms. Nelles is not a suitable candidate to give medications that night because she was on constant nursing care.

7

A. That's right.

8

Q. So the only person left then who could have given medication is Mrs. Trayner.

10

A. That's right.

11

Q. Because Mrs. Christie was not allowed to give medications?

12

A. That's right.

13

Q. So that all four of you then had legitimate nursing reasons to be in 418.

15

A. That's right.

16

Q. And I believe in answer to Mr. Percival you said that of the 4A babies the sickest and smallest babies would be in 418.

18

A. That's right.

19

Q. And these are the babies through the long night shift that required the most amount of nursing attention, don't they?

22

A. That's right.

23

Q. And any nurse assigned to a baby

24

25



1

2

in 418 would be required to check those babies assigned to her frequently.

3

4

A. That's right.

5

6

Q. Now, Mr. Knazan has suggested to you that Mrs. Christie's baby in 418 had just come back from the intensive care unit.

7

8

A. That's right.

9

10

Q. Now, if we look at the assignment book again -- I'm sorry -- that baby I understand was Halpin, is that right?

11

A. Yes, Mrs. Christie's, yes.

12

13

14

Q. It is hard to establish I guess exactly when the child came to the ward, but if you look on page 178 that is the 7 to 3:00 day portion of 4A's assignment book, isn't it?

15

16

A. That's right.

17

Q. Would you confirm with me that Halpin does not appear to be on that one?

18

19

A. That's right.

20

Q. And he doesn't, he or she doesn't appear until the 3 to 7 shift.

21

22

A. That's right.

23

Q. So that would indicate that the child came some time during the long day shift.

24

25

A. That's right.



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Q. To Ward 4A. I believe you told Mr. Knazan you had no independent recollection that this child had come from the intensive care unit.

A. That's right.

Q. But if the child -- if he is correct and the child had come from the intensive care unit, would you agree with me that that child would have to be monitored very closely?

A. Watched, yes.

Q. Watched. And that Mrs. Christie in carrying out her nursing duties would be in and out of 418 on a very frequent basis.

A. Yes.

Q. And you, I gather, only had babies that night of Cook's death in 418?

A. That's right.

Q. And so except for your breaks, you would be feeding the babies, doing their vital signs, caring for the four children.

A. That's right.

Q. And in your notes, Exhibit 379, you have drawn up, you have drawn out in the diagram which is on page 6 an inset of Room 418, is that correct?

A. That's right.



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Q. And you were caring for the children then on either side of Cook, and is it the two on the north side of the room?

4

5

A. The two on the lower side.

6

Q. The lower side, that is nearest to the door?

7

A. That's right.

8

9

Q. And while you were feeding the children was it your practice to sit in a rocking chair and hold the child?

10

11

A. Any chair that was available, rocking or straight back.

12

13

Q. You have said some children are good feeders and some are poor feeders.

14

A. That's right.

15

16

Q. What length of time would it take to feed a child?

17

18

A. It could take anywhere from 15 to 45 minutes to an hour to feed one child. It depends how slow they were.

19

20

Q. Can you tell us of the three babies that you fed, you said that Jadina was the fourth, was a good feeder, how long did the others take to feed?

21

22

23

A. I recall them being fairly good

24

25



12 2 feeders.

3 Q. Which would be what sort of time
4 range?

5 A. 15 to 20 minutes at the most.

6 Q. As you fed those children, would
7 you face into the room, that is, towards the television
8 set when Gone With The Wind was on?

9 A. I don't know where I would have been
10 sitting, I could have been sitting by the bedside if
11 they were connected to a monitor.

12 Q. The question is would you turn
13 towards the TV set?

14 A. Not always, most times.

15 Q. Pardon?

16 A. Most times, but not always.

17 Q. No, I am just asking about the
18 night of Gone With The Wind.

19 A. Yes. I can't recall.

20 Q. During the time of feeding the
21 children was it a social thing that you might talk
22 to another nurse who was also feeding a child?

23 A. That's right.

24 Q. So if Mrs. Christie was feeding
25 her child might you both talk while you were feeding
your children?



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A. Possibility, yes.

3

Q. Is it more likely then that

4

you would turn to the other people in the room as

5

opposed to turning your back to them while feeding

6

a child?

7

A. Probably turn towards the people

8

in the room, yes.

9

Q. And Cook then is in the center

10

of the room?

11

A. That's right.

12

Q. On one side. Would you agree

13

with me that in Room 418 that there would be a great

14

deal of comings and goings by nursing staff on any

15

night into that room?

16

A. That's right.

17

Q. So for example on the night of

18

Cook's death, there would be three nurses coming and

19

going who were assigned to their babies?

20

A. That's right.

21

Q. And the comings and goings would

22

be either for breaks or to get supplies, or any other--

23

A. That's right.

24

Q. And in addition the team leader

25

would come and go into the room?

26

A. Yes.

27

28



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Q. Because she is responsible for the nursing care given by her team?

3

4

A. That's right.

5

6

Q. And in addition would the night supervisor come by into that room?

7

A. Yes, she made rounds once a night.

8

9

Q. And the night of Cook's death she was there more than once?

10

A. I can't recall how often Lynn

11

was there that night.

12

Q. She has given evidence that she

was there more than once.

13

A. I remember seeing her there

14

once.

15

Q. And in addition would doctors

come and go into 418?

16

A. I don't know if they would come

17

and go into 418 or not, I know I have seen them around the nursing station.

18

19

Q. I am talking about particularly

the doctors who were assigned, that is, either the fellow or the resident assigned to the care of the children.

20

21

22

A. They possibly could come in the

23

room and see the child, yes.

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Q. And on that particular night we know that both Doctors Kantak and Jedeikin came into 418 to check on Justin Cook.

A. That's right.

Q. So would you agree with me on that night that there were a number of people who had legitimate reasons to be in 418?

A. That's right.

Q. And there would be a number of interruptions of any nurse giving nursing care in that room?

A. Yes.

Q. Now, you have told us that the busy times on the ward were when you came on shift, is that right, around 7 to 8?

A. Well, no, at 7 to 8 we were in report.

Q. I mean you are fully occupied at that time?

A. That's right.

Q. And then you said around 9 p.m.

A. To approximately -- 8 to 10:30 is a fairly busy time.

Q. 8 to 10:30. There is a medication time in part of that?



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A. Yes. The RN's usually give
medications at 9:00 at night.



1

8mar84 2 Q. Then you said there was another
EE 3 busy time around midnight.
RDrc

4

A. That's right.

5

Q. And why was it busy then?

6

A. Vital signs, children had
to be fed again.

7

8

Q. How long would that busy
time last?

9

10

A. Anywhere from one to two
to three hours. It would depend how many children
you had and what your assignment was.

11

12

Q. Then you said there was
another busy time at four.

13

14

A. That's right.

15

Q. And then, I guess, the next
busy time would be at shift change?

16

A. Just before shift change.

17

Q. Just before shift change.

18

When you are charting and finishing up the things from
the long night shift?

19

20

A. Sometimes you wouldn't stop
from four o'clock right through until the time of
going home.

21

22

23

Q. As a Registered Nursing
Assistant, did you know that Registered Nurses were

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EE2

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not permitted to administer any medications below
the drip chamber?

A. Did I know that registered
nurses were not allowed to?

Q. Yes.

A. I didn't think they were
allowed to, no.

Q. But you were aware of that
fact?

A. Yes.

Q. Now, at the night of Cook's
death, you told us that early in the shift you had
seen a syringe and ampule taped to the inside of
the Cook crib; is that correct?

A. That's correct.

Q. And you said, I believe, that
you were not sure if the ampule was broken?

A. That is right.

Q. And did you take the tape
off to look at it?

A. I don't think I had to take
the tape off to look at it. I think they just taped
the top part and the name was exposed.

Q. The top part of the ampule?

A. The ampule.



EE3

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Q. And what about the syringe?

Was it part of the same tape?

A. I don't know if it was the same piece or two pieces of tape up there. I can't say.

Q. Did you look at the syringe?

A. No, I just looked at the ampule.

Q. So, do you have any idea if the syringe was predrawn?

A. I can't say.

Q. Did you see any ampules beside Cook's bedside?

A. I can't recall any ampules beside his bedside.

Q. When you went on shift that night, that is, starting on the 21st at 7:15, did you receive, your team receive report from Marie Mandal?

A. That is right.

Q. And were all of your team there except for Susan Nelles?

A. That is right.

Q. Would she have gone immediately to the Cook bedside?

A. That is right.

Q. And do you recall whether or



EE4

1

2

not there was any reporting on Cook?

3

A. I can't recall.

4

THE COMMISSIONER: Sorry, any report

5

on what?

6

MS. SYMES: Any reporting on Baby

7

Cook.

THE COMMISSIONER: Oh, yes.

8

MS. SYMES: Q. I gather that you

9

were well aware that Cook's condition was considered

10

grave?

11

A. I can't say what I remember

12

when I heard -- I don't remember hearing his --

13

Q. You knew he was on constant

14

nursing care?

A. That is right.

15

Q. That would indicate that

16

someone had a concern about his health?

17

A. That's right.

18

Q. At the report, was there any

19

question raised of a shortage of Inderol or propranolol
on 4A?

20

A. Not to my knowledge.

21

Q. Do you recall any discussion

22

about borrowing; that propranolol or Inderol had been

23

borrowed on the long day shift?

24

25



EE5

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A. I don't recall any discussion.

Q. Do you recall any discussion about there was a shortage or a need to borrow propranolol or Inderol for the long night shift?

A. I don't recall any discussion.

Q. Now, you have told us about 418 and, in the little diagram that you have drawn in the inset on page 6 of your notes, what do the lines indicate, what you have drawn, the boxes?

A. In the room?

Q. Yes.

A. Beds.

Q. Those would be actual cribs?

A. Yes.

Q. They don't represent then the sheets or drapes around the beds?

A. No, it is just where the cribs would be.

Q. And if the room were filled, that is, have six beds, and the crash cart brought in, would that make the room very crowded?

A. Yes, it would.

Q. If any of those beds have got sheets or drapes around them, you said that would make your job more difficult in caring for the child



Brownless
cr.ex. (Symes)

1
EE6 2 next to that?

3 A. It would make it awkward
4 because I couldn't see my child from across the room
5 if I was at one corner and the drapes were drawn
6 around the middle bed. Then, I wouldn't be able to
7 see my child on the other side of the room.

8 Q. I gather then you have no
9 recollection of the drapes being drawn around Cook's
10 bed that night?

11 A. That's right.

12 Q. Aside from your breaks that
13 night, your coffee breaks and your supper breaks
14 and going to get formula, et cetera, I gather you
15 spent most of the night in Room 418?

16 A. A fair bit of it, yes.

17 Q. Did you see anything unusual
18 that evening at all with respect to the care of Justin
19 Cook?

20 A. No, I didn't.

21 MS. SYMES: Those are my questions.

22 THE COMMISSIONER: Thank you.

23 I think we will take 20 minutes now.

24 --- recess.

25 --- on resuming.

THE COMMISSIONER: Mr. Rosenberg.



EE7

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CROSS-EXAMINATION BY MR. ROSENBERG:

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Q. Miss Brownless, I act for Nurse Sui Scott, and I only want to talk to you about Estrella; okay?

6

7

The first thing I would like for you to look at is the 4A assignment book. I think Mr. Olah can give that to you.

8

9

MR.OLAH: I think she already has it.

10

11

A. What exhibit is it?

12

13

MR. ROSENBERG: Q. 32A.

14

15

16

17

A. A, B or C?

Q. A, Tab 13. Would you look at page 36 and 37, first of all.

18

19

20

21

22

23

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A. I have it.

Q. Okay. Now, we now, first of all, that the Estrella baby died during the long night shift of January 10th. I am asking you to look at January 9th, first of all.

First of all, you see that Mrs. Scott had Estrella on constant care that night as well.

A. That is right.

Q. Do you remember that?

A. Yes, I do.

Q. Do you remember she was, as well, in 423 on that night, as well as the following



Brownless
cr.ex. (Rosenberg)

EE8

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night?

A. Yes.

Q. It looks like the same people were on the long night shift of January 9th as on January 10th; is that right?

A. That is right.

Q. Okay. It is not exact, but it looks like basically the same babies were in the rooms and that the nursing assignments were similar; at least during the 9th and 10th. Is that fair?

A. Fair, yes.

Q. Now, first of all, from my looking at the assignment book, it is not normal that a baby would be on constant care; it is not a normal thing during the night, is it?

A. It is not usually normal, not unless it is ordered.

Q. Right. In particular, it is unusual that a baby would be on constant care in Room 423, would you agree with that? That, usually, it is in Room 418?

A. Not necessarily, no.

Q. Really?

A. I have seen them in other rooms on constant care.



Brownless
cr.ex. (Rosenberg)

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EE9

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Q. Have you? What about 423,
though? That is the isolation room.

4

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A. That is not necessarily
used for isolation, but Janice Estrella, if I recall,
was in isolation.

7

8

9

10

Q. Okay.
Let me just see if I am clear about
this. What you are saying is, it is not unusual that
a baby would be on constant care alone in Room 423
or that is unusual?

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A. If a child wasn't in isolation?

Q. Either way, it doesn't
matter.

A. If he wasn't in isolation and
there was no other bed available, I couldn't see it
unusual.

Q. Do you recall ever seeing
that before, a baby being in 423 on constant care?

A. Not necessarily 423. I have
seen it in 438 and 439, which are private rooms on
4B.

Q. 4B, yes. I want to know
about 423.

A. I can't recall seeing, re-
membering a baby except of Leith -- I don't remember if



EE10

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Leith was on, having one nurse looking after that child in 423.

Q. Was that baby on constant care?

A. I think the nurse only had one patient that day.

Q. Okay. All right.

As I recall your evidence from yesterday, you have no clear recollection, one way or the other, about when Mrs. Scott took her breaks and when she was relieved, if she was relieved. You just can't -- right now, you don't have any clear recollection as to what time that happened or anything about that; is that fair?

A. That is true.

Q. Okay. Do I take it that goes for both those nights, January 9th and January 10th?

A. That is correct.

Q. Okay. You have testified that you recall dropping into the room on January 10th, just seeing if Mrs. Scott wanted anything.

A. That is right.

Q. Was that January 10th or January 9th?

A. As best as I can recall it was



EE11

1

2

January 10th.

3

Q. Did you do the same thing

4

on January 9th?

5

A. I possibly did, yes.

6

Q. All right. On January 9th,

7

do you recall seeing Mrs. Trayner in the room at that
time with Mrs. Scott?

8

A. I can't say.

9

Q. But just so I have it clear

10

in my own mind, I take it the reason that someone

11

might drop in to see if Mrs. Scott wanted anything

12

would be, unlike 418, there was simply no other

13

nurse who would have a reason to be down there? If a
nurse was on constant care in 418, there would usually

14

be other nurses around?

15

A. That is right.

16

Q. Okay. If you are in 423,

17

you would have to go down to the end of the hall and

18

make a special trip?

19

A. That is right, if you didn't

20

have the patients in 426 or 425.

21

Q. Okay.

22

Now, what I want to do is see if I
can assist your memory as to what happened the night

23

of January 10th. That is the night that the baby died.

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EE12

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So, if you want to flip to that
page in the assignment book.

A. I have it.

Q. Okay.

As well, I wonder if we could have
the chart for Estrella. That is Exhibit 91.

Do you have that?

A. Thank you.

Q. Now, what I want to do,
Miss Brownless, just so you understand, I want to
point out some things in the chart to see if they
assist your memory at all as to what may have happened
that night.

A. January 10th?

Q. January 10th.

So, let's start at page 128 of the
chart. Do you have that? So we are on the same page,
that is the nursing note for January 10th.

A. Yes, it is.

Q. Signed by Mrs. Scott at the
bottom?

A. Yes.

Q. All right. What I want to
point out to you is, about the middle of the page there
is a note:



1
EE13 2 "Parents and grandmother in..."
3 What, "visited"?
4 A. Yes.
5 Q. "...at evening grandmother
6 was tearful."
7 MS. CRONK: "Tearful".
8 MR. ROSENBERG: I said "tearful".
9 MS. CRONK: I'm sorry. I beg your
10 pardon.
11 MR. ROSENBERG: Q. "...tearful".
12 Now, do you recall --
13 MS. CRONK: I apologize.
14 MR. ROSENBERG: Q. Do you recall
15 the Estrella parents and the grandmother, in particular,
16 being there and some commotion, she was crying?
17 Do you remember that?
18 A. No, I don't.
19 Q. That doesn't help your
20 memory?
21 A. No, it doesn't.
22 Q. I take it Mrs. Scott would
23 have been in the room when that was going on? She
24 would have been with them and the baby?
25 A. Yes.
Q. Okay.
Let's then go to page 126A. That is



1

EE14

2

just a couple of pages.

3

Do you have that? 126A?

4

A. I have two 126s.

5

Q. I thought every one's had

6

A and B on them.

7

A. Mine doesn't.

8

Q. Okay. Do you see a page that
has the number 42 along with it?

9

A. Yes, I do.

10

Q. You have got that. That is

11

the page I am interested in.

12

A. Okay.

13

Q. About two-thirds of the way
down, there is something about the IV.

14

Do you see that?

15

A. Yes, I do.

16

Q. Could you just read that.

17

A. "IV interstitial at 1645.

18

Discontinued at that time. Restarted
at 1800 hours. However went inter-
stitial again."

19

20

Q. That would have been during

21

the day shift, is that right?

22

A. That's right.

23

Q. What I want you to look at

24

25



1
EE15 2 now is page 53.
3 A. 53?
4 Q. 53, yes. That would be
5 near the front.
6 A. I have it.
7 Q. Okay. That is the medications,
8 nursing treatment record?
9 A. That's right.
10 Q. Do you see the record there
11 for the ampicillin?
12 A. Yes, I do.
13 Q. Do you see the indication
14 was that it was to be given at 1800 hours and 2400?
15 A. That's right.
16 Q. And that, in fact, it was
17 given at 7:30?
18 A. That's right.
19 Q. 1930, and 1:30 in the
20 morning.
21 A. That's right.
22 Q. In other words, the meds
23 apparently had been pushed back because of the trouble
24 with the IV. Does that make sense to you?
25 A. Pushed ahead -- pushed back,
yes, that's right.



EE16

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Q. We know what we mean. In other words, it couldn't be given at 2400. Everything had gotten shifted down?

A. That's right.

Q. Okay.

Finally, I would like you to look at page 215.

A. I have it.

—



FF/BM/LB 1

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2

Q. And that's, what's it called,

3

the flow sheet?

4

A. That's right.

5

Q. And you will see that the

6

baby's signs have been taken, it looks like at
midnight, one o'clock and two o'clock.

7

A. That's right.

8

Q. And Mrs. Scott has signed

9

for them?

10

A. That's right.

11

Q. Does that look like her writing

12

for the signs, the figures?

13

A. I think so, yes.

14

Q. Okay. Can you help me,

15

do the signs at 2:00 o'clock look particularly
different than those at 12:00 o'clock and 1:00

16

o'clock? Has that baby had much of a change in

17

condition from midnight and then 1:00 o'clock and

18

2:00 o'clock?

19

A. There doesn't seem to be

20

any difference, no.

21

Q. Okay. Now, we saw back on

22

page 53 that Mrs. Scott had signed for the

23

ampicillin. Do you remember that?

24

A. Yes.

25



1

2

Q. At 1:30?

3

A. That's right.

4

Q. And then it appears she had

5

taken the signs at 1:00 o'clock and at 2:00

6

o'clock?

7

A. That's right.

8

Q. Okay. Does that assist you

9

as to when she may have taken her lunch break, that

10

is, for example, after the 1:30 medication and

11

then prior to the 2:00 o'clock signs?

12

A. I can't recall.

13

Q. Do you recall when you took

14

your lunch break that night?

15

A. No, I don't.

16

Q. Do you remember who else took

17

your lunch with you?

18

A. No, I don't.

19

Q. Okay. I'm just going to ask

20

you to try one other piece of evidence to help you.

21

Remember Mrs. Christie's lawyer asked you or read

22

some of Miss Parcels' testimony to you from the

23

preliminary.

24

A. Yes, I remember.

25

Q. Okay. He just read you the

examination in chief, I'm going to read you the



1

FF3

2

cross examination, it is a little long, so, I
would like you to have it front of you.

4

MR. OLAH: What page?

5

MR. ROSENBERG: That will be page

6

31, Volume 20.

7

A. Yes.

8

Q. First of all, who was
Miss Parcels?

9

A. Shirley Ann Parcels, she

10

was an RN on 4B.

11

Q. 4B, okay. This is about

12

the fact that according to Miss Parcels, Mrs.

13

Trayner and Mrs. Scott were both out of the

14

Estrella room at one point in time. Now, as I

15

recall it, your evidence was at least when the

16

code was called you heard Mrs. Scott call that
from the room, is that right?

17

A. That's correct.

18

Q. And your recollection is

19

that you were at the nursing station at the time
for whatever reason?

20

A. That's right.

21

Q. And you called the code?

22

A. That's right.

23

Q. Okay. Let's look then at

24

25



FF4

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2

at about line 19, okay.

3

A. Yes.

4

Q. "Here you are .." this is

5

Miss Parcels.

6

"Q. Here you are around 2:00

7

o'clock in the morning in the back

8

of the nurses station, is that right?

9

A. Correct.

10

Q. That's where the nurses have
their coffee and so on?

11

A. Correct.

12

Q. They were there, Phyllis

13

Trayner, Bertha Bell Sui Scott
and Janet Brownless, right?

14

A. Correct. "

15

So, I take it you don't recall that

16

specifically? Is that right.

17

A. That's right.

18

Q. Okay.

19

"Q. That, notwithstanding the

20

fact that baby Estrella was under
constant nursing care, is that
correct?

21

22

A. Yes.

23

Q. So, the two nurses or the

24

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FF5

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nurse that was assigned to baby Estrella's care was under constant nursing care. Sui Scott was at the nursing station and the nurse who was to relieve Phyllis Trayner was also there?

A. Yes.

Q. Approximately 10 minutes you say?

A. Yes.

Q. I guess it is hard to be exact about times like that?

A. It is.

Q. What were you doing, having a coffee?

A. Yes, we were.

Q. You don't know who if anyone was with baby Estrella?

A. Correct.

Q. By the way, did you see who came in to the nursing station, first Phyllis Trayner, Sui Scott, do you recall?

A. No, I'm sorry, I don't recall.

Q. Pardon.



FF6

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A. I don't recall.

3

Q. Do you know where they came
from when they came in?

4

5

A. No, I don't.

6

7

Q. And of course after coffee
or whatever went on in the nursing
station Sui Scott apparently went
back to baby Estrella's room, 423,
and it was shortly after that you
heard a scream?

8

9

10

11

A. Correct.

12

13

14

Q. And you had no idea who might
have been in that room before the
10 or so minutes when both nurses
were in the nursing station?

15

16

A. No."

17

Let me just stop for one minute.

18

Do you recall Miss Parcels being in the nursing
station when you called the code?

19

A. No, I don't.

20

Q. Okay.

21

22

23

"Q. I take it from your evidence
that isn't the first time when you
worked on the cardiac ward of the
Sick Childrens Hospital that you saw

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FF7

that type of thing go on in respect
of constant nursing care?

A. Correct.

Q. I think you mentioned that
you have seen on occasion when you
have worked where a situation or
situations where if a child is on a
cardiac monitor the nurse on constant
nursing care will turn up the intercom,
leave the room and go to the nursing
station ?

A. It could even be just across
the hall down to another room or
go to a fridge to get a formula."

So what she seems to be saying, and
it is not entirely clear, is that at some point
prior to the code being called she saw Phyllis
Trayner and Mrs. Scott at the nursing station
apparently having coffee or something and there
is something there about the intercom being
turned on.

Now, does that help your memory?

A. I can't see Sui leaving the
room and turning on the intercom.

Q. Okay, that's fine.



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So what I am going to suggest to you is perhaps Mrs. Trayner, although she was supposed to be relieving Sui, came back to the nursing station, turned on the intercom and then Mrs. Scott returned to the room that night. Do you recall that?

A. I don't recall the intercom being on.

Q. Okay. I take it as Miss Parcels has pointed out it is not proper to simply put on the intercom when a baby is on constant care.

A. I have never seen a nurse do it on constant care.

MR. ROSENBERG: Okay, thanks very much.

THE COMMISSIONER: Are you next, Mr. Tobias?

MR. TOBIAS: I believe so. Mr. Labow has left, he had no questions of this witness.

THE COMMISSIONER: Oh all right.

MR. SHANAHAN: I have no questions either, Mr. Commissioner.

THE COMMISSIONER: All right, Mr. Shinehoft.



FF9

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MR. SHINEHOFT: I will have no questions of this witness, Mr. Commissioner.

THE COMMISSIONER: I would suggest that Mr. Olah and Ms. Cronk get ready for action this evening because it is going to make quite a difference.

MR. TOBIAS: I am a little bit amazed in that since Shanahan and Shinehoft have no questions and in as much as I am cross examining I have no idea why they are still here, but I have seen stranger things happen.

MR. SHINEHOFT: We won't be here for long.

MR. TOBIAS: Oh, I asked for that.

CROSS-EXAMINATION BY MR. TOBIAS

Q. Miss Brownless, my name is Warren Tobias and as you know I act for the family of Jordan Hines. I hope you understand that it is my responsibility here to ask some questions which will touch upon the death of Jordan Hines and I know that that is a sensitive and painful subject for you. I take no pleasure in asking the questions but they have to be asked, I hope you understand?

A. Yes, I do.

Q. You told Ms. Cronk yesterday



FF10

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that the Hines family was your acquaintance. I wonder if you could just elaborate upon that a little bit. Can you tell me how it was that you came to know the Hines family, what was your relationship with them?

A. A girl I used to work with at Scarboro Centenary, it was her neighbour and that's how I got to meet them.

Q. I see. So, I take it that it was through this mutual friend that a relationship developed?

A. That's right.

Q. And was June Hines and Adrien Hines someone that you saw often prior to the events of March of 1981?

A. Not every day but I saw them fairly often in the street.

Q. And I take it you had met their family and knew they had other children?

A. I knew their two little boys quite well.

Q. Fine. With respect to the fact that you discovered on coming on duty on March 6th, I believe it was, that the Hines baby was a patient in the Hospital, was that something



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was your relationship with the Hines family basically known to other staff members on ward 4A and B over the course of the two, two and a half days that he was in the hospital?

A. I'm not sure if everybody knew but a few nurses knew that I knew the family.

Q. All right. I take it that it wasn't something that you tried not to disclose or that you tried to hide?

A. I didn't try to hide it.

Q. And had anyone wanted to enquire and find out they could have?

A. That's right.

Q. All right, fine. Now, at the time that you came on duty on the 6th, do you recall how it was that you were advised that the Hines child was in the Hospital?

A. I don't recall how I found out.

Q. Is it possible that this mutual friend of yours and Mrs. Hines might have phoned you. Does that help to refresh your memory, do you recall her calling you that day?

A. I don't recall her calling me but there is the possibility that I found out that way.



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FF12

Q. All right. You also told

Ms. Cronk yesterday or the day before perhaps that you don't recall what time of day on March 6th that you first saw the Hines child but you recalled at sometime that day you went down to his room and his parents were there. Do you recall giving that evidence?

A. Yes, I do.

Q. Prior to doing that, had you discussed with any of the nurses on duty on ward 4B why the child was in Hospital?

A. I can't say if I did or not.

Q. All right. It's possible you might have and you just don't recall that right now.

A. That's right.

Q. Okay. Do you know if you had any information at all from any of the nurses or from any of the Doctors or from any other source for that matter regarding at that time on March 6th, 1981, what the child's condition was?

A. All I can recall is that Jordan was fairly stable, I don't recall any other reports.

Q. All right. Well, what I am



FF13

1
2 really interested in is this. Prior to going down
3 to his room and meeting with his parents, did you
4 have any information at all as to what the
5 preliminary diagnosis was or what treatment had
6 been prescribed for him?

7 A. I think I knew his
8 admitting diagnosis but I don't recall knowing
9 anything further.

10 Q. And do you recall now what
11 that admitting diagnosis was?

12 A. I think it was tachycardia
13 and apnea.

14 Q. All right, fine. And at the
15 time that you first went down to room, I believe
16 it was 438?

17 A. That's correct.

18 Q. To see the parents, did you
19 give them any information regarding what the
20 preliminary diagnosis was?

21 A. No, I didn't.

22 Q. Do you recall them discussing
23 it with you, did they seem to have any information
24 regarding the preliminary diagnosis?

25 A. I can't recall.

Q. Okay, fine. I take it that



1

2

room 438 is located somewhat further down from
the nursing station than 431?

3

4

A. That's correct.

5

Q Is that a single bed room?

6

A. Yes, it is.

7

Q. Is that in fact an isolation
room?

8

A. It can be used for an

9

isolation room, yes.

10

Q. All right. Do you know if

11

on March 6th, 1981, Jordan Hines was the only one
in that room?

12

A. He was the only one in there,
yes.

14

Q. And did you know at the time,

15

or did you have any information at all at the time

16

you entered the room as to whether or not it was

17

being used as isolation or whether there was

18

just no other patients to share that room?

19

A. There was just no other -

20

well they only use it for a one bed room.

21

Q. All right.

22

A. And it wasn't being used

for isolation.

23

Q. All right. And is that

24

25

FF14



FF15

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something that you have a clear recollection of,
that it was not being used for isolation or that
you simply can't recall whether it was or wasn't?

5

A. I have a clear recollection.

6

7

8

Q. All right. So as far as you
know there was no medical reason why he should be
in isolation, and I'm going now to your state of
knowledge on March 6th, 1981.

9

A. That's right.

10

11

12

Q. Okay, fine. I understand that
on that day you have indicated in evidence here
that as far as you could tell he appeared to be
relatively stable?

13

14

A. That's right.

15

16

Q. Do you recall how many
occasions on March 6th, 1981, you would have seen
this child?

17

18

A. I can't recall how many, it
was more than once.

19

20

Q. All right. Do we know that
the one time the parents were there?

21

22

A. That's right.

Q. Do you recall going back to
the room later?

23

24

25

A. The elevators that I go home



FF16

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2

on are down that hall, so, I possibly stopped in
on my way home.

4

Q. All right. And at that time
do you recall whether the parents, or either of
the parents were still there?

6

A. I can't say for sure.

7

8

Q. All right. So, you seemed
to have a recollection that you dropped in on at
least one other occasion at the end of your shift
that day?

10

11

A. That's right.

12

Q. And that would have been I
take it at 7:00 or 7:30 p.m. somewhere around
that time?

13

14

A. Anywhere from 7:15 to 10 to 8.

15

Q. All right. And did you look
in on the child again?

16

17

A. Possibly I did on my way out
the door.

18

19

Q. All right. Do you recall any
other observations you made at that time regarding
his condition?

20

21

A. He looked fairly comfortable
to me.

22

23

Q. All right. There hadn't

24

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FF17

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been I take it any change from when you had seen him earlier?

A. That's correct.

Q. Did you make any enquiries during that day and I am talking about enquiries other than actually going into the room, of any of the nursing staff or medical staff for that matter on 4 B regarding his condition?

A. I possibly did but I don't recall.

Q. Okay. So again, your best recollection is you just don't recall one way or the other?

A. That's right.

Q. In any event, did anyone that day as far as you can recall bring to your attention any problems or concerns with respect to the child's condition?

A. None were brought to my attention.

Q. Okay. Now I take it, or I shouldn't say I take it, let me ask you the question. Did you indicate to any of the medical or nursing staff on 4B that day that you knew the child and had some special concern for him



1

2

because he was the son of an acquaintance and
did you ask to be kept informed?

4

A. I can't recall if I said
that or not but there is a possibility that I did.

5

6

Q. Okay. In any event is it
your impression now that other staff members knew
of your interest and would have been under the
impression that you would have wanted to know if
there were any problems?

7

8

9

10

A. Some were aware and some
were not.

11

12

Q. Okay. And your best
recollection is, no one brought any problems to
your attention then?

13

14

A. That's correct.

15

16

Q. Now, you have also indicated
that you saw the child again on March 7th, 1981.

17

A. That's correct.

18

19

Q. And I take it in fact you
were assigned the care of that child from 3:00 p.m.
on March 7th until the end of your shift, which
would have been 7:00 p.m. on March 7th. Do I have
that correct.

20

21

22

A. That's correct.

23

24

Q. And I believe the general

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FF18



FF19

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of your evidence the other day to Ms. Cronk was that again over that time period the child appeared comfortable, the child appeared stable, there was no cause for any concern. Is that a fair and accurate cummary?

A. That's right.

Q. I would like to explore with you for a moment what you mean by the observation that the child was stable.



DM.jc
GG

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Do I take it from that that what you are really indicating is that in terms of his condition there had been no deteriorating, and no cause for immediate concern; is that what you mean when you say stable?

A. Yes.

Q. I take it therefore that one can be ill; one can in fact have an illness, or a sickness and yet be stable?

A. That's right.

Q. Is that fair?

A. That's fair.

Q. Now my information is, and please correct me if I have this incorrectly, was that the basic problem in terms of why the child was admitted to Hospital; and as you know he had been transferred from the North York General, did you know that?

A. Yes, I did.

Q. The basic problem was that he was exhibiting apneic spells and periods of tachy/bradycardia. So that it appears that he was suffering from some sort of cardiac arrhythmia. Is that information also your information, do I have that correctly?

A. Yes, that is what I recall.



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Q. Now, I realize you don't have any formal medical training per se, in that you are not a medical doctor. But with respect to your experience in working on the cardiac ward, I take it that you are familiar generally with what a cardiac arrhythmia is?

A. That's correct.

Q. Do I have it correctly that in fact it is a heart rhythm that is not normal?

A. That's right.

Q. Do I also have it correctly that cardiac arrhythmias if not treated, and if not monitored, and if not watched, and indeed if not checked, can potentially be very serious?

A. Yes.

Q. People can die from a cardiac arrhythmia, is that correct?

A. I couldn't say. As I said, I don't have the medical experience, but it is a fair assumption.

Q. Okay, fine. So that potentially an arrhythmia I take it is a life threatening event. I am not suggesting for a moment that everyone that exhibits an arrhythmia goes on to succumb to an arrhythmia, but it can be a potentially life



GG.3

1
2 threatening event; do you agree with that?

3 A. I can't really say, I don't
4 know.

5 Q. Fine. Let me assist you by
6 indicating to you that we have heard evidence here,
7 from Dr. Hastreiter and Dr. Kauffman, that essentially
8 it can be a life threatening event if not treated
9 properly. Now, having given you that background
10 let me ask you this question. When you say the child
11 was stable, are you really saying that given the
12 condition he had, the cardiac arrhythmias that he
13 was exhibiting, even having shown signs of that
14 malady, he was certainly not expected to succumb to
15 it at that time or in any imminent danger of dying
16 from the arrhythmias that he was exhibiting, is that
17 really what you mean when you say he was stable when
18 you saw him?

19 THE COMMISSIONER: Mr. Roland has
20 some comments.

21 MR. ROLAND: What this witness has
22 said up to that question is it is impossible for her
23 to give an answer to that because she doesn't even
24 know, and as she indicated does not have the medical
25 knowledge to know whether it is life threatening or
not° What my friend is asking is a fair question of



GG.4

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2 some other witness, but I don't think it is a fair
3 question to this witness to give that kind of
4 medical opinion of this child and her observation
5 that he is stable. He has asked her to conclude
6 was it life threatening and so on, when she has
7 already indicated that she doesn't have the medical
8 knowledge to give that kind of opinion.

9 MR. TOBIAS: With respect, Mr.
10 Commissioner, and with the greatest of respect to my
11 friend, I think his objection is around three minutes
12 too late, because I was no longer asking about
13 whether arrhythmias can or cannot be life threatening.
14 I was asking her to expand upon what she meant by
15 the term "stable", and I was suggesting a concept,
16 and whether or not that was the concept she was
17 talking about. If he is right in his observations,
18 and frankly he is, I see no reason to fear the
19 answer.

20 MR. ROLAND: My point is she can't
21 have that concept without the medical knowledge.

22 THE COMMISSIONER: Can you trust
23 me, Mr. Roland?

24 MR. ROLAND: I can trust you, I just
25 don't know what the answer is going to be. It seems
to me whatever the answer is it is of no use to you
at all.



GG.5

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MR. TOBIAS: Well, again I think that is more appropriate in argument.

THE COMMISSIONER: I think I know what the answer is going to be but I am going to allow the question in any event.

MR. OLAH: Maybe we can have the question again.

MR. TOBIAS: I was about to say I should step back about three steps, Miss Brownless, and repeat the question, it was rather in a typical fashion long-winded and I will try and follow the Scott rule and cut it down somewhat.

Q. When you talk about the child being stable, are you really not saying that given the condition that he was exhibiting at that point, the arrhythmias, and notwithstanding what that might or might not mean, he certainly was not expected to succumb to that condition at that point; he wasn't in any imminent danger of dying from that condition?

A. When I left his apex was regular.

Q. Okay, fine. Can I take it from that that when you left he had not shown signs of the very arrhythmias that I have been talking about, is that what you mean when you say his apex was regular?



GG.6

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A. That's right.

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Q. And one of the reasons I take it that he was on a cardiac monitor was to give an early warning if he did get into problems with arrhythmias?

6

7

A. That's right.

8

9

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Q. And the whole point of that is that action can be taken, or could be taken rather, to prevent him dying from that problem; do I have that correctly?

11

A. That's correct.

12

13

Q. And the same thing can be said with respect to the apnea monitor, that is the whole point of having him on the apnea monitor?

14

15

A. That is correct.

16

17

Q. Now you made progress notes on page 34, of the child's medical record, Exhibit 103, Mr. Commissioner?

18

A. I don't have his chart here.

19

THE COMMISSIONER: Page?

20

MR. TOBIAS: 34, sir.

21

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Q. Now your progress notes for March the 7th, 1981; I wonder if you could assist me, the first line "chest" is that occasional "occ", occasional?



GG.7

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A. Yes.

3

Q. "Congested" and then I don't

4

really understand the next symbol, is that "AETO"?

5

A. Yes, air entry throughout.

6

Q. I am sorry?

7

A. Air entry throughout.

8

Q. Can you explain to me what that means?

9

A. When you listen to his chest

10

on all four lobes you can hear air entry throughout.

11

Q. And that is something that

12

accompanies chest congestion I take it?

13

A. No, if they had a lot of

14

congestion you wouldn't hear air entry throughout.

15

Q. I see. So in other words

16

that is a positive sign, a sign that the chest itself is clear?

17

A. Fairly clear, even though

18

he had a congestive cough.

19

Q. And then you say:

20

"Nasal discharge thick white mucus".

21

Now, I take it that that afternoon the child's nasal passages were congested?

22

A. That's correct.

23

Q. Do I have it correctly that

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neonates, and Jordan Hines was a neonate, ordinarily breathe through their nose?

A. I can't say whether they breathe through their nose or not.

Q. During the course of your shift that afternoon from three to seven, did you have any occasion to have to suction the child?

A. If I did I would have charted it, and I didn't chart it.

Q. You agree with me though that if you read the note of Registered Nursing Assistant Lyon, which appears on page 34 above that, she does note that - and this is about five lines up in her note:

"Suctioned for small amount of nasal congestion - cleared."

So it would appear that some time prior, this is on the 6th of March, 1981, Registered Nursing Assistant Lyon had to suction the child?

A. That's right.

Q. And that would be again due to a problem with nasal congestion?

A. That's right.

Q. In your experience, is it possible that nasal congestion in a baby under one



GG.9

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month of age can lead to difficulties in breathing?

3

A. Sometimes it blocks the airways

4

and the girls have to suction it clear.

5

Q. And if the airways are blocked

6

I take it that that interferes with the breathing process?

7

A. That's right.

8

Q. And it's the absence of that

9

process really, the definition of apnea is the

10

absence of respiration, is that correct?

11

A. That's right.

12

Q. So that to some extent or

13

another, congestion can interfere with the breathing process and produce apneic spells?

14

A. That is a fair assumption.

15

Q. Now you told me before, and I

16

might ask you, on an apnea monitor in the Hospital,

17

and you indicated to Miss Cronk the other day that

18

there are various settings, and those settings relate to seconds, is it, 5, 10, 15, 20 seconds?

19

A. I think it is 10, 15 and 20

20

seconds.

21

Q. And the way that works is that

22

if the apnea monitor was set for instance at 10

23

seconds, any time more than 10 seconds went by without

24

25



GG.10

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the child taking a breath that would trigger the
monitor I take it?

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A. That's right.

5

6

7

Q. Now do you know, is there any
general rule for what those monitors are set at, or
what they were during that nine-month period with
which we are dealing?

8

9

A. We usually had it set at 20
seconds.

10

11

12

13

Q. Now I take it one of the
reasons for choosing a setting is that if the apneic
spell were any less than that amount of time that it
was set for, it was either a non-life threatening or
non-significant event?

14

15

A. Well, if the alarm went off
we would go over and check the child.

16

17

18

19

Q. All right, that is precisely
my point. If you set it at 20, then the child could
have an apneic episode that lasted for 10 seconds
and you wouldn't even know about it, correct?

20

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A. If it was set, yes.

Q. If it was set at 20. I take
it that inherent in that is the decision that you
were not particularly concerned with an apneic
episode that lasted only 10 seconds, and that is why



GG.11

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you set it for a longer period at 20?

3

A. That's right.

4

Q. And your best recollection is

5

that over the course of time that you were caring

6

for Jordan Hines, the apnea monitor did not go off?

7

A. That's right.

8

Q. Do you have any information

9

that the apnea monitor went off at any other time on
this child prior to the time that he arrested?

10

A. After I went home?

11

Q. Yes, up until today, do you

12

have any information from any source at the Hospital

13

that that monitor ever went off other than the time

14

it went off when he finally arrested?

15

A. I don't recall.

16

Q. I take it though that given

17

your special concern for this child, if you had been

18

told that by someone that is something you would
recall?

19

A. That's right.

20

Q. In the absence of that

21

recollection I take it it is a fair assumption that

22

you probably don't have any such information, is
that correct?

23

A. That's right.

24

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GG.12

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Q. Now after Jordan Hines passed away, did you on any occasion discuss with Susan Reaper the Hines' arrest and the reasons for it?

A. I don't recall who I - I don't think I talked to anyone afterwards, I talked to the parents.

Q. I am not talking now about only that period of time immediately following the arrest. I am saying at any time following his passing away on March the 8th, 1981, do you recall having discussed with Susan Reaper in particular the arrest and what the cause of the arrest was?

A. I don't recall a conversation.

Q. Now you are not indicating by that response I take it that you didn't have such a conversation, it is just that you have no recall of it today?

A. That's right.

THE COMMISSIONER: I wonder if you could put the precise conversation, I take it there was one, or at least that is your information, would you put it to her.

MR. TOBIAS: In fact, sir, that is not my information and I have nothing to put to her in that regard, I wanted to confirm that.



GG.1

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MR. OLAH: I am not sure you can
confirm something that doesn't happen.

4

MR. TOBIAS: You can't confirm
something that never took place.

5

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THE COMMISSIONER: You certainly gave
the right answer, witness.

7

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MR. TOBIAS: Q. Now, do you recall
at any time after the arrest of Jordan Hines any
discussion that you had with Liz Radojewski concerning
his arrest and what the reasons for the arrest were?

11

THE COMMISSIONER: Yes. All right.

12

MR. TOBIAS: Q. Do you recall any
discussions with her?

13

14

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16

A. I recall having one discussion
with her. I don't recall what was said. I know it
was concerning Jordan Hines but I can't recall what
the whole conversation was about.

17

18

Q. Do you recall who it was
initiated that discussion?

19

A. I think it was me.

20

21

22

Q. Do you have any recollection
of what concerns you may have raised, quite apart
from her response, do you have any recollection of
what you said to her?

23

24

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A. No, I don't.



GG.14

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Q. And other than the nurses that I have indicated, Liz Radojewski and Susan Reaper, do you have any recall of any discussion you may have had with other nurses on Ward 4A/B concerning the arrest or the reasons for it?

A. I can't recall any other discussions.

Q. You have already told us about a discussion you had with Dr. Schaffer. Do you recall questioning any of the other doctors regarding the arrest of Jordan Hines and the reasons for it?

A. No, I didn't question any other doctors.

Q. Now you also said in chief, when Miss Cronk was examining you, that your immediate reaction to the death was that you were upset, you were shocked and you were surprised. Was that shock a perception that was generally shared by other nurses on Ward 4A and B?

A. I can't say for sure how everybody else felt.

Q. Is that because you have no recollection of that now?

A. That's correct.

Q. And do you know, or would it



GG.15

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surprise you to know, that we have heard evidence
here from Nurse Radojewski that two of the team
leaders, she was not able to tell us which team
leaders, but two of the team leaders on Wards 4A/B
had approached her the week of March 16th, 1981,
concerning a number of these deaths, and that one of
the deaths they expressed concern over was that of
Jordan Hines, did you know that?

A. No, I didn't.



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HH/RD/ko

2

A. No, I didn't.

3

Q. Okay. You also told us that

4

with respect to your conversation with Dr. Schaffer

5

that you could not recall his response and you said

6

you did not think he was hiding anything from you,

7

but you had no specific recollection of what he told

8

you regarding the cause of death. Do you recall

9

giving that evidence?

10

A. Yes, I do.

11

Q. Now, obviously, because of

12

your familiarity with the Hines family and your

13

concern specifically with respect to this child, do

14

I take it that, had he given you a concise and well

15

documented, believable explanation, had he given you

16

a cause of death, that is something that you would

17

recall, I take it?

18

A. That's right.

19

Q. In fact, that would, in effect,

20

relieve the concern that you had. Do I take it,

21

therefore, that because you can't recall the specific

22

conversation that there is reason to believe that

23

perhaps he didn't have an explanation to give you at

24

that time, he didn't know himself?

25

A. That's fair.

Q. Do you think that is a fair



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assumption?

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A. Yes.

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Q. And does that question help

5

you recall whether, in fact, that was the general

6

tone of that conversation that he, himself, didn't

7

have an explanation? Do you have any recollection of
that now?

8

A. No.

9

Q. On Saturday, March 7th, 1981

10

I take it that you were not responsible for the care

11

of any of the children who were in Room 431?

12

A. That is correct.

13

Q. Do you recall now who was

14

responsible for the other children in that room?

15

A. No, I don't, without seeing

the assignment book.

16

MR. OLAH: Perhaps we could have the

17

assignment book.

18

MR. TOBIAS: Okay, fine. Perhaps

19

you could turn to the assignment book.

20

MR. OLAH: Page 150 and 151 if you

have got it.

21

THE COMMISSIONER: March 7th?

22

MR. TOBIAS: Yes, the assignment book

23

is Exhibit 32, Tab 14.

24

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THE COMMISSIONER: 118/119.

3

MR. TOBIAS: Page 117.

4

THE COMMISSIONER: I think for March
7th 118.

5

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MR. TOBIAS: You are right, Mr.
Commissioner; I am sorry. It is 118-19.

7

MR. OLAH: I am sorry, I am wrong.

8

THE WITNESS: I have it.

9

MR. TOBIAS: Q. All right. Now it
appears that during the day, and that would have been
the time that you were on that there were four
children in the room. Do I have it correctly that
was Mrs. Lyons who was caring for them?

13

A. That is right.

14

15

Q. Babies Ho, Baker, Silva
and Hollander?

16

A. That's right.

17

18

19

Q. All right. Your recollection,
however, was, in chief, that it was Mrs. Harwood-
Jones who gave the prescribed dosage of ampicillin
to Jordan Hines at 4:00 p.m.?

20

21

A. That's what was signed for.
I don't recall seeing her give it.

22

23

Q. All right. Do you have any
recollection of it now being someone other than

24

25

HH 3



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HH 4

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Mrs. Harwood-Jones? Could it have been Mrs. Lyons?

3

Is that possible?

4

A. Mrs. Lyons is an RNA and she could not give him the medication.

5

6

Q. Do you know or do you have any recollection whatsoever, of which RN administered drugs during the course of the time that you were in Room 431 to the other children in that room on that day?

7

8

A. I can't say who gave the medications earlier.

9

10

Q. I take it you would have to look at their charts in order to satisfy yourself on that point?

11

12

A. That is correct.

13

14

Q. Do you have any information whatsoever about the kinds of medications those other children were on?

15

16

A. No.

17

18

Q. Now, we have heard evidence here to the effect that in neonates, apneic spells -- and I realize that in effect that begs definition, because some people take definition on how long absence of breathing has to be to be a true apnea. But we have heard some evidence that it is not all that unusual in neonates to see brief periods of

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apnea. Does that correspond with your experience on the ward?

A. Could you repeat the question?

Q. What I am saying is that we have heard evidence from other medical witnesses to the effect that brief periods of apnea in neonates is not that unusual an occurrence. Does that correspond with your experience on the cardiac ward?

A. I can't say. I can't recall looking after a child that had apneic spells.

Q. Other than Jordan Hines?

A. That is right.

Q. Fine. Are you in any position whatsoever to assist me on what it is that you, given your own experience and training, would be more concerned with, that is the arrhythmia on the one hand or the apneic spells on the other? Can you give me any opinion whatsoever as to what you would find a greater cause of concern?

A. I would be concerned about both.

Q. In the same degree?

A. Yes.

Q. Okay, fine. Is it common to see one condition accompany the other in your experience?

A. I can't say.



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Q. In other words, to see the
apnea and the arrhythmia together?

A. I can't say.

MR. OLAH: I am not sure you can say.
She has already indicated this is the only time she
has treated a child with this problem.

MR. TOBIAS: All right, I think that
is fair.

THE COMMISSIONER: I would think that
one would follow the other. It is the important thing,
which came first, because if a child's heart stops the
breathing stops shortly and if the breathing stops I
would think the heart stops, too.

MR. TOBIAS: Yes, I would agree.

THE COMMISSIONER: I speak out of a
depth of ignorance.

MR. OLAH: You will recall the numerous
articles and theories we have had in that regard from
medical opinions, so I am not sure Miss Brownless is
the appropriate witness.

MR. TOBIAS: As a matter of fact, I
was about to assure my friend that I have no intention
of canvassing that particular issue, especially in
that Ms. Brownless wasn't on duty at the time of the
arrest.



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Q. Miss Brownless, do you recall Mrs. Hines being at the hospital on the Saturday afternoon, March 7th, 1981?

A. Yes, I do.

Q. And did you, during that afternoon, spend any time with her at all?

A. A short while, yes.

Q. All right. How long would that be?

A. I can't say how long. Less than an hour.

Q. But I take it more than a few moments?

A. That is correct.

Q. I take it this would have been an opportunity for you to discuss various things with her, not just necessarily the condition of her child, but other questions of mutual concern, I take it?

A. That's correct.

Q. Do you recall at that time whether or not any codes went off while you were with Mrs. Hines?

A. I don't recall.

Q. You have no recollection of that whatsoever?



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A. No I don't.

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Q. All right. Do you recall

4

Mrs. Hines asking you, at any time, what a code was
or what it meant or having any discussion with her
regarding what it meant when a child's monitor went
off?

7

A. I don't recall that conversation.

8

Q. All right. Do you recall, at

9

any time, Mrs. Hines looking at the child with great

10

concern on her face about the possibility of her

11

child's monitor going off and do you have any

12

recollection whatsoever of saying to her: "Don't even

13

think that, it's not possible"; do you recall that

14

conversation at all?

15

A. No I don't.

16

Q. All right. Now, I take it that

17

what you are saying is you don't recall saying that.

18

You are not saying you necessarily didn't say it?

19

A. That's true.

20

Q. Okay, fine.

21

Now, you indicated to Ms. Cronk the
other day that you, in effect, would have gone out of
your way over the course of those two days to pop in
on the Hines child and keep an eye on him?

23

A. That's right.

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Q. I would also think, therefore, that you would have been particularly alert over those two days, and correct me if I am wrong, with respect to anything you might hear about the Hines child?

A. That is correct.

Q. In fact, if an alarm went off on the ward or someone got into trouble I would think that one of the things that you would think of immediately is, my god, I hope it's not the Hines child. Is that accurate as well?

A. A lot of times you hear alarms going off and it is just a child moving and it sets the cardiac alarm to go off.

Q. I take it, or let me ask you: did you, from time to time, make enquiries about it, just in a casual way, perhaps you were passing the nursing station, did you think to ask how is the Hines child doing?

A. I possibly did.

Q. Do you recall hearing anything, either on March 6th or 7th, which caused you any concern whatsoever, with respect to the condition of that child?

A. I don't recall any concerns.

Q. Fine. Thank you. Those are



1
HH 10 2 all my questions.

3 THE COMMISSIONER: Thank you, Mr.
4 Tobias. Mr. Olah.

5 RE-EXAMINATION BY MR. OLAH:

6 Q. Miss Brownless, you will recall
7 that today Mr. Hunt was questioning you about an
8 alleged, the conversation that took place between you
9 and Mary Joan Rankin. What I would like to do is take
10 you back and just explore for a moment in re-examination,
11 is your contact with the police after the arrest of
12 Susan Nelles. We know from the statement that was put
13 in as an exhibit today by Mr. Percival, that you were
14 interviewed by the members of the Homicide Squad on
15 March 25, 1981 from 8:30 in the morning until about
16 12:30 in the afternoon.

17 A. That's correct.

18 Q. And then they subsequently
19 returned on April 7th and interviewed you to complete
20 the Miller statement.

21 A. That's correct.

22 Q. And then they re-attended and
23 spoke to you on April 14, 1981 in the afternoon to
24 talk to you about the statement that Mary Joan Rankin
25 gave.

A. That's correct.



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Q. Then I understand on May 4th, 1981, at 8:10 in the morning, they re-attended and questioned you, with respect to the child, Estrella. Do you remember being questioned about that?

A. Possibly. I don't have that date with me.

Q. And then after the discharge of Susan Nelles I understand the police re-attended and questioned you again with respect to a number of other children.

A. That is correct.

Q. And one of those children was Jordan Hines.

A. That is correct.

Q. And that they then re-attended on a sixth occasion, on November 9th, 1982, and obtained further statements from you.

A. That's correct.

Q. And that on January 10, 1983 they re-attended once more and questioned you about the death of Bruce Floryn.

A. That's right.

Q. And on December 2nd, 1981 you met with the Crown Attorneys, Wiley and McGee, who questioned you about a number of deaths?



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A. That is correct.

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Q. So as I make it out, you were

4

questioned by either the police or the crown

5

attorneys on some eight separate occasions?

6

A. That's right.

7

Q. And on all times you assisted

8

the police and answered their questions?

9

A. That's right.

10

Q. And, of course, when it became

11

evident that your conversations with Mrs. Trayner were

12

relevant you advised Ms. Cronk of that?

13

A. That's right.

14

Q. Now, if you thought that you

15

had any relevant and vital information at any time,

16

either prior to the arrest of Susan Nelles or there-

17

after, in the terms that Mary Joan Rankin suggests

18

you said, would you have come forward and given it to

19

the police?

20

A. Yes I would have.

21

Q. Would you have waited to be

22

questioned by the police or would you have come forward

23

on your own?

24

A. I would have come forward on my

25

own.

Q. Now, when you were, in fact,



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questioned by the police with respect to that statement do you recall how you expressed the people that you were impressed by?

A. I said one particular team.

Q. And is that the way you believe you mentioned it to Mary Joan Rankin?

A. Yes, that is what I believed.

Q. Now, a couple of final small details that I would like to clean up with you. I am not sure if we have had evidence of this, but it may be of some assistance to the Commissioner.

On the evening before Jordan Hines' death did you have a conversation with Jordan's mother?

A. Yes, I did.

Q. And can you tell the Commissioner how that came about?

A. Mrs. Hines was concerned before she went home because he wasn't feeding properly.

Q. When was that, was that in the evening or the afternoon?

A. That was in the afternoon before she went home. I told her to call me around 7:00, 7:15 before I went home and I could tell her how he ate again and how he was before I left to go home.



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Q. Did she subsequently, in fact,
contact you around 7 o'clock?

A. Yes, she did.

Q. And what did you tell her at
that time?

A. I told her how much he ate,
that he was sleeping and resting comfortably.

MR. OLAH: Thank you.

MR. TOBIAS: I take it this would have
been March 7th?

MR. OLAH: Yes, that's correct.

THE COMMISSIONER: Saturday wasn't it?

MR. OLAH: Saturday evening, March
7th, sir, the evening prior to his arrest.

THE COMMISSIONER: Fine.

MR. OLAH: Q. Am I correct in that,
Miss Brownless?

A. Thst's right.

Q. One further matter. Did you
speak to Dr. Schaffer with respect to the death of
Jordan Hines on one occasion or on more than one
occasion?

A. I recall more than one occasion.

Q. Did you ever ask him about the
results of the autopsy on Jordan Hines?



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A. I can't recall.

3

Q. Now, can you be any more

4

specific as to the number of times you spoke to
Dr. Schaffer?

5

A. No I can't.

6

Q. Was it more than two occasions?

7

A. I would say one or two

8

occasions; I can't recall how many.

9

Q. On those occasions what were

10

you trying to get from Dr. Schaffer?

11

A. Why Jordan died.

12

Q. Now, the final matter that I

13

wanted to speak to you was a very brief reference that

14

Mr. Brown had when he was questioning you today and

15

you said that you couldn't recall, your attention was

16

drawn to Susan Nelles going across the hall to get a

17

bottle and you couldn't recall that occurring. I

18

wasn't clear -- that was in relation to one child.

Was that in relation to Jadina?

19

A. Yes it was.

20

Q. Is that a boy or girl by the

way?

21

A. It is a girl.

22

Q. If that did occur where did

23

that bottle have to come from?

24

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A. The pantry across the hall.

3

Q. Is it right across the hall

4

from Room 418?

5

A. Yes it is.

6

Q. Is there a refrigerator in 418

7

where this would be or in the pantry where the
formula would be kept?

8

A. That's right.

9

Q. So in your estimation how long

10

would it take to get that formula if Susan Nelles did
go across the hall?

11

A. Less than a minute.

12

MR. OLAH: Thank you, sir. Those are
all the questions I have.

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THE COMMISSIONER: Thank you.

Ms. Cronk?

MS. CRONK: Yes. Thank you, sir.

REDIRECT EXAMINATION BY MS. CRONK:

Q. Miss Brownless, you will be pleased to know that I have very few questions but I do have one or two.

THE COMMISSIONER: No more pleased than the rest of us.

MS. CRONK: I am sure the relief is enormous in at least two quarters, sir.

Q. I would like to draw your attention back to the night that Justin Cook died. You will recall that you spoke of Saturday, March 21st with a number of counsel today. I would like to review certain of the events that took place shortly before that child's death. You told me during the course of your evidence in chief, as I understood it, that you could have taken, as best as you could recall it, your second coffee break on Saturday, March 21st at 3:00 or 3:30 in the morning and that it was possible that it was 3:00 a.m. Do you recall giving that evidence?

A. Yes, I do.

Q. As I understood it, you told



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us several times that Susan Nelles fed one of your children you thought at approximately 3:00 a.m. Do you recall giving that evidence?

A. Yes, I do.

Q. You have also told us that the child that she did feed, Jadina, was a good eater and that she would have taken her feeding in approximately fifteen minutes. Do you recall saying that?

A. That's right.

Q. And then when Ms. Symes had a discussion with you today you told her that a good feeder, to use that language, an infant of that kind would take fifteen to twenty minutes to complete a feeding.

A. That's right.

Q. And as I understood it you have also told us that the length of the second coffee break that you took would have been somewhere between five and fifteen minutes. I suggest that because you have told us that on one occasion when you were interviewed by officers of the Metropolitan Toronto Police you have acknowledged that you are recorded as having said that it lasted five or ten minutes and on another occasion ten to fifteen minutes so that we know it was somewhere between the earliest and the latest



1
II3 2 outside limit was five to fifteen minutes; is that
3 fair?

4 A. That's fair.

5 Q. All right. I would like to
6 ask you to assume for the moment that you took your
7 break closer to three o'clock that morning than you
8 did and it was not 3:30, that you took it somewhere
9 around three o'clock. If that were so and your break
10 lasted from five to fifteen minutes, as you have told
11 us, then you would have been back in Room 418 at
12 about five minutes after three or 3:15 a.m., depending
13 on how long the break was; is that fair?

14 A. That's fair.

15 Q. All right. And you have told
16 us that you took your break at the nursing station,
17 that's where you spent your time?

18 A. That's correct.

19 Q. And you remember speaking
20 to Lynn Johnstone at the nursing station?

21 A. That's right.

22 Q. And you have told us before
23 that you don't recall seeing Susan Nelles at the
24 nursing station one way or another, is that right?

25 A. That's right.

Q. So, I take it that because you



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don't recall one way or the other it is possible that she was there?

A. That's correct.

Q. And indeed we have discussed previously you told representatives of the Metropolitan Toronto Police on November 9, 1982 that Susan Nelles was in the nursing station with Lynn Johnstone and Bertha Bell when you were there. Do you remember we discussed that?

A. Yes, I do.

Q. All right. And what I am going to suggest to you, Miss Brownless, and invite your comment is the following activities in that 45 minutes before Justin Cook died. I am going to suggest that you took your break somewhere around three o'clock and it lasted ten or fifteen minutes. That's possible from what you have told us?

A. That's right.

Q. It is also possible from what you have told us that not all of your children, all of your four children were fed before you took that second coffee break because you have told us you don't remember when ~~they~~ they were to be fed that night, is that fair?

A. That's fair.



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Q. So that you could have taken that break around three o'clock without all four and specifically with one, Jadina, not yet having been fed?

A. That's correct.

Q. And I am going to suggest to you that during the time of your break in accordance with the evidence that you have given before the Commissioner you know that Lynn Johnstone was at the nursing station because you recall speaking to her at that time.

A. That's right.

Q. All right. I am going to suggest to you further that Susan Nelles was at the nursing station. I know that you don't recall one way or the other but we know that at one point you thought that she was because you told the police that.

A. That's right.

Q. All right. And then you have told us that at the conclusion of your break, which you have said would be somewhere in this scenario between five after three and a quarter after three or twenty after three in the morning, you went directly back to Room 418; do I have it correctly?

A. I am going to suggest to you that Susan Nelles may already have been back in the



1
II6 2 room at that time; in any event it is certainly where
3 you went at the conclusion of your break.

4 A. That's right.

5 Q. I am going to suggest to you
6 further that it is possible that it is at that time,
7 at the conclusion of your break at about a quarter
8 after three or twenty after three, that Susan Nelles
9 began to feed one of your patients, Jadina. We know
10 that she did feed her. I am just asking you for the
11 moment to indicate whether it is possible that she
12 fed her at 3:15 or 3:20 in the morning.

12 A. There is a possibility, yes.

13 Q. In that scenario that would
14 fit?

14 A. Yes.

15 Q. If that were done we know
16 that you were in and out of the room several times
17 during the course of that evening, it is possible
18 that you could again, fifteen or twenty minutes
19 later, have again left the room and stopped at the
20 nursing station. Is that a possibility?

20 A. A possibility, yes.

21 Q. And at that time -- well,
22 I'm sorry, we also know from your evidence that you
23 were at the nursing station, based on your recollection
24
25



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2 of events, when you heard Susan Nelles call out for
3 Phyllis Trayner. You remember distinctly being at
4 the nursing station. Do I have that correctly?

5 A. Yes, that's correct.

6 Q. And you have told us that
7 when you heard Susan Nelles call out for Phyllis
8 Trayner you went back into Justin Cook's room with
9 Lynn Johnstone and Phyllis Trayner and Justin Cook
at that time was having a blue spell?

10 A. That's correct.

11 Q. And at the same time when
12 you went back in the room you told us that you took
13 Jadina off Susan Nelles' shoulder.

14 A. That's correct.

15 Q. She would have been feeding
16 that child, or at least still holding the child after
17 the feeding, from the scenario that I am suggesting to
you?

18 A. When I took her off she
19 had her rocking on her shoulder.

20 Q. All right.

21 THE COMMISSIONER: I'm sorry, she
22 had what on her shoulder?

23 THE WITNESS: She was rocking her on
24 her shoulder.
25



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II8 2 THE COMMISSIONER: Oh, rocking her.
3 MS. CRONK: Q. I am suggesting that
4 she could very well still have held the child, after
5 holding the child when you went in the room at 3:40
6 or 3:45 in the morning if she had started to feed her
7 at 3:15 or 3:20 in the morning?
8 A. That's right.
9 Q. All right. And under this
10 possible scenario she would have had time to feed the
11 child that fifteen or twenty minutes that you said it
12 takes for a fast feeder and still would have been
13 holding the child and rocking the child?
14 A. That's correct.
15 Q. And I suggest to you that
16 if those were the events between three and 3:45 that
17 morning they fit with your having had a break at the
18 nursing station by way of a second coffee break some
19 time between three and 3:30, it fits with that?
20 A. Yes.
21 Q. And it also fits with Lynn
22 Johnstone having told the Commissioner that she talked
23 to Susan Nelles at the nursing station for five or
24 ten minutes regarding Justin Cook's condition shortly
25 after three o'clock when she arrived, it is consistent
with that too, is it not?



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A. That's correct.

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Q. And it fits as well with

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Susan Nelles having fed one of your four children,
Jadina?

5

A. That's right.

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Q. It fits as well with you

7

being on your recollection at the nursing station
when Susan Nelles called out for Phyllis Trayner?

8

9

A. That's right.

10

Q. And it fits as well with

11

Susan Nelles still holding Jadina when you re-entered
that room when Justin Cook was having his blue spell?

12

A. That's right.

13

Q. All right. All I am suggest-

14

ing to you is that that is a possible sequence of
events given what your evidence has been and given
what I have told you about Lynn Johnstone's evidence,
that's possible?

15

16

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A. Yes, it is possible.

18

Q. And if that is the case, can

19

we go this far together, it would mean that someone
else was in Room 418 between three and 3:15 or 3:20
in the morning when you, and I suggest Susan Nelles,
were at the nursing station speaking to Lynn Johnstone?

20

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A. There is a possibility, yes.

24

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II10 2 Q. Well, I'm sorry, if Susan
3 Nelles and yourself were at the nursing station someone
4 had to be looking after Justin Cook, isn't that right?

5 A. That is right.

6 Q. And I put it no higher than
7 that, but someone had to be in the room with Justin
8 Cook?

9 A. That's right.

10 Q. All right. There is one
11 other matter with respect to Justin Cook and it
12 relates to the night before, Friday, March 20th. There
13 has been a discussion with you again today about
14 Justin Cook and the Echo lab and I remember very well
15 when you told me when you first heard about that, so
16 I am not going to dwell on it too much longer. You
17 have told us today as I understood it that it was
18 possible to do an Echo cardiogram in Room 418, is that
19 correct?

20 A. That is correct.

21 Q. And you told Ms. Symes that?

22 A. That's correct.

23 Q. I would like you to turn to
24 Justin Cook's chart if you would for a moment, Exhibit
25 116.

I am hoping you will be able to help



1
IIII 2 me with this, Miss Brownless. Perhaps you can, per-
3 haps you can't. Can you look at page 23, please.
4 A. I have it.
5 Q. Okay. We have heard in
6 prior evidence from Mrs. Bell and others that this
7 is a requisition form for an Echo cardiogram for
8 Justin Cook and you will note that it is dated, although
9 it is difficult to read in the photocopying, but it
10 bears the date March 20, 1981. Do you see that?
11 A. Yes, I do.
12 Q. If an Echo cardiogram had
13 been done on the ward in Room 418 can you tell me
14 was it standard practice to fill out an Echo cardio-
15 gram requisition form, or do you know?
16 A. I can't say for sure.
17 Q. All right. Is it possible
18 that it was and possible that it wasn't?
19 A. That's correct.
20 Q. I am going to show you as
21 well another exhibit, which is Exhibit 349. This was
22 provided to us by Mr. Roland on behalf of the Hospital
23 and it has been described to us as an extract from
24 the Echo Lab log book for the night of Friday, March
25 20, 1981, and you will see at the very bottom of it
Justin Cook's name. Do you see that?



1
II12 2 A. Yes, I do.
3 Q. Now, you will appreciate
4 I don't know a great deal about the procedures on
5 the cardiac ward for the conduct of Echocardiograms
6 but if an echocardiogram had been done in Room 418
7 or anywhere on the ward as distinct from the lab,
8 would there be any form of record sent to the lab
9 to record that a test had been done?
10 A. I would think so, yes.
11 Q. All right. If the information
12 that has been provided to us is accurate, and we
13 accept that it is and that this came from the Echo
14 Lab log book, it would appear to suggest, would it
15 not, that that is where the test was done?
16 A. That's correct.
17 Q. And you have told us that
18 you didn't know that Justin Cook had even had an
19 Echo cardiogram on March 20th?
20 A. That's right.
21 Q. So, I take it you have never
22 heard it suggested by anyone that his echo test was
23 done on the ward that night until today?
24 A. That is correct.
25 Q. And you don't have any
information one way or the other?



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A. That's correct.

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Q. If I suggested to you that

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Phyllis Trayner had testified at the preliminary

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hearing that he, Justin Cook, had been taken to the

6

Echo Lab for that test, without getting into the

7

timing of it, I take it you would have no reason

8

to disagree with that?

9

A. That's right.

10

Q. Thank you.

11

I would ask your indulgence for

12

one moment, sir.

THE COMMISSIONER: Yes, certainly.

13

MS. CRONK: Q. And finally could

14

I ask you to turn to the progress notes again for

15

Justin Cook. You will recall having looked at these

16

today. It is page 26. Do you have it?

17

A. Yes.

18

Q. And you will recall your

19

attention being drawn to a number of the entries

20

on this page. Again, they relate to Friday, March

21

20th. But I am interested for the moment specifically

22

in the one that says the babe was taken for Echo by

Dr. Schaffer.

23

A. Yes, I see it.

24

Q. Does that suggest to you, as

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it does to me, that he was taken elsewhere than the room that he was in for that test?

A. Yes, it does.

Q. All right. Your attention was also drawn to the description of Justin's condition when he arrived on the ward. I am looking now at the beginning of the progress note where it says:

"On arrival the babe was found to be very cyanotic."

Do you see that?

A. Yes, I do.

Q. And then your attention was drawn to the next entry, "Hands, feet and lips were very dark blue".

A. That's what it says.

Q. And it was suggested to you that that was a description of a very sick infant and you agreed with that.

A. That's right.

Q. And I don't quarrel with that at all, Miss Brownless, but I suggest to you as well that it is a description precisely of a child who was very cyanotic.

A. That's right.



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II15 2 MS. CRONK: Thank you. I have no
3 further questions, sir. I would like to thank you
4 for your assistance to the Commission, Miss Brownless.
5 THE COMMISSIONER: Yes, thank you,
6 Miss Brownless.
7 If we have nothing further then
8 until ten o'clock on March 19th, is that right?
9 MS. CRONK: That is correct, sir.
10 THE COMMISSIONER: And at that time
11 Mrs. Scott will be the witness.
12 MS. CRONK: That is correct, sir.
13 THE COMMISSIONER: And I hope every-
14 body has a pleasant school break, Commission break
15 or whatever you want to call it.
16 MS. CRONK: Thank you, sir.
17 --- whereupon the hearing was adjourned at 5:00 p.m.
18 until Monday, the 19th day of March 1984, at
19 10:00 a.m.
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